

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Massachusetts Mutual Life Insurance Company Political Action Committee

ADDRESS (number and street)

1295 State Street

☐ Check if different than previously reported. (ACC)

Springfield

MA

01111-0001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00118943

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Bruce C. Frisbie

Signature of Treasurer

Mr. Bruce C. Frisbie

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y Y 12 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		140099.03
(b) Cash on Hand at Beginning of Reporting Period.....	2149.86	
(c) Total Receipts (from Line 19)	107334.20	721584.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	109484.06	861683.43
7. Total Disbursements (from Line 31)	65539.95	817739.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43944.11	43944.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Massachusetts Mutual Life Insurance Company Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	98005.02	537242.96
(ii) Unitemized	9326.85	176243.91
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	107331.87	713486.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	107331.87	713486.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	3900.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	2896.14
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.33	1301.39
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	107334.20	721584.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	107334.20	721584.40

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	183.57	5738.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	183.57	5738.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	63500.00	804250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	3903.85
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1840.47	3550.80
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1840.47	3550.80
29. Other Disbursements	15.91	296.34
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	65539.95	817739.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65539.95	817739.32

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	107331.87	713486.87
34. Total Contribution Refunds (from Line 28(d))	1840.47	3550.80
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105491.40	709936.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	183.57	5738.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2896.14
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	183.57	2842.19

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

Filing Amendment to correct errors related to formatting, missing employer information and any imported transaction discrepancies (receipts/disbursements).

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRAD SOMMA

Mailing Address 96 INDIAN RD

City

PORT CHESTER

State

NY

Zip Code

10573-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1969.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 16452542

Amount of Each Receipt this Period

130.50

Full Name (Last, First, Middle Initial)

B. GEORGE S. KINIGOPOULOS

Mailing Address 3028 SENECA CHIEF TRL

City

ELLICOTT CITY

State

MD

Zip Code

21042-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

944.52

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 20066814

Amount of Each Receipt this Period

166.68

Full Name (Last, First, Middle Initial)

C. MICHAEL A. BOOK

Mailing Address 28 CRAWFORD RD

City

WESTPORT

State

CT

Zip Code

06880-1824

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : 64001555

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2797.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. RICHARD T. NOLAN

Mailing Address 250 PEHLE AVE STE 40

City

SADDLE BROOK

State

NJ

Zip Code

07663-5830

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : 64001556

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JAMES E. SYPHER

Mailing Address 26638 SE 15TH ST

City

SAMMAMISH

State

WA

Zip Code

98075-7928

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2604.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : 64001557

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. RICHARD E. ROSE III

Mailing Address 3512 PRIMROSE AVE

City

GREENSBORO

State

NC

Zip Code

27408-3193

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : 64001559

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. CHRISTOPHE R. LEWIS

Mailing Address 112 BURNE RUN

City
MADISON

State Zip Code
MS 39110-4008

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2826.10

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 30 / 2014

Transaction ID : 64001560

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TIMOTHY DANIELL

Mailing Address 8151 LA RUE LN

City
OOLTEWAH

State Zip Code
TN 37363-6679

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 64001696

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. IVAN VALDES

Mailing Address 2001 WAYHAVEN CT

City
MAITLAND

State Zip Code
FL 32751-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.05

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 64001697

Amount of Each Receipt this Period

83.35

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2643.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. KENT L. WYSE

Mailing Address 3359 MARVIN DR

City

ADRIAN

State

MI

Zip Code

49221-9290

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 64001698

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. IVAN M. ILLAN

Mailing Address 2369 S BEVERLY GLEN BLVD

City

LOS ANGELES

State

CA

Zip Code

90064-2466

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 64001699

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. SYLVIA C. YOUNG

Mailing Address 9211 63RD PL W

City

MUKILTEO

State

WA

Zip Code

98275-3531

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

640.02

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : 64001700

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

220.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WALTER B. BERMAN

Mailing Address 2547 JARDIN TER

City
WESTON

State Zip Code
FL 33327-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 64001701

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. DONALD G. SCULLY

Mailing Address 11133 S LAKESIDE OAKS AVE

City
BATON ROUGE

State Zip Code
LA 70810-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

916.85

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 64001712

Amount of Each Receipt this Period

83.35

Full Name (Last, First, Middle Initial)

C. DANIEL J. SHANAHAN

Mailing Address 8412 NORMAN ESTATES WAY

City
RALEIGH

State Zip Code
NC 27613-5963

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.06

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 28 / 2014

Transaction ID : 64001713

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

213.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BERNARD T. GARRAH

Mailing Address 32651 GREYSTONE CIR

City

AVON LAKE

State

OH

Zip Code

44012-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

11 / 28 / 2014

Transaction ID : 64001714

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. DONALD G. SCULLY

Mailing Address 11133 S LAKESIDE OAKS AVE

City

BATON ROUGE

State

LA

Zip Code

70810-3068

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.20

Date of Receipt

12 / 19 / 2014

Transaction ID : 64001728

Amount of Each Receipt this Period

83.35

Full Name (Last, First, Middle Initial)

C. DANIEL J. SHANAHAN

Mailing Address 8412 NORMAN ESTATES WAY

City

RALEIGH

State

NC

Zip Code

27613-5963

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.06

Date of Receipt

12 / 19 / 2014

Transaction ID : 64001729

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BERNARD T. GARRAH

Mailing Address 32651 GREYSTONE CIR

City

AVON LAKE

State

OH

Zip Code

44012-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001730

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. TIMOTHY DANIELL

Mailing Address 8151 LA RUE LN

City

OOLTEWAH

State

TN

Zip Code

37363-6679

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001742

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. IVAN VALDES

Mailing Address 2001 WAYHAVEN CT

City

MAITLAND

State

FL

Zip Code

32751-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.75

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001743

Amount of Each Receipt this Period

83.35

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

268.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. KENT L. WYSE

Mailing Address 3359 MARVIN DR

City
ADRIAN

State Zip Code
MI 49221-9290

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001744

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. IVAN M. ILLAN

Mailing Address 2369 S BEVERLY GLEN BLVD

City
LOS ANGELES

State Zip Code
CA 90064-2466

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001745

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. SYLVIA C. YOUNG

Mailing Address 9211 63RD PL W

City
MUKILTEO

State Zip Code
WA 98275-3531

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001746

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WALTER B. BERMAN

Mailing Address 2547 JARDIN TER

City
WESTON

State Zip Code
FL 33327-1517

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 19 / 2014

Transaction ID : 64001747

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. GARY SANCILIO

Mailing Address 127 DARROCH RD

City
DELMAR

State Zip Code
NY 12054-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 24 / 2014

Transaction ID : 64001762

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCOTT T. GULLICKSON

Mailing Address 6423 GABRIELLE WAY

City
DAVENPORT

State Zip Code
IA 52807-3970

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2014

Transaction ID : 64389596

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totalling \$100.00 This changes the YTD Total to \$150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1030.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAVID R. KROLL

Mailing Address 5501 E GRANDVIEW RD

City

SCOTTSDALE

State

AZ

Zip Code

85254-1173

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

90.00

Date of Receipt

12 / 02 / 2014

Transaction ID : 64389598

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$90.00

Full Name (Last, First, Middle Initial)

B. REVA Z. AZEEZ

Mailing Address 28511 PEWTER KNOLLS DR

City

KATY

State

TX

Zip Code

77494-0674

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

12 / 08 / 2014

Transaction ID : 64389601

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$150.00

Full Name (Last, First, Middle Initial)

C. IVAN VALDES

Mailing Address 2001 WAYHAVEN CT

City

MAITLAND

State

FL

Zip Code

32751-4924

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.75

Date of Receipt

12 / 19 / 2014

Transaction ID : 64389602

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$416.65 This changes the YTD Total to \$416.75

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GREG A. HARVEY

Mailing Address 15521 KESSLER ST

City

OVERLAND PARK

State

KS

Zip Code

66221-9333

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 64389696

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$150.00 This
changes the YTD Total to \$325.00

Full Name (Last, First, Middle Initial)

B. DANIEL D. THOMASON

Mailing Address 405 COLEBROOK LN

City

DICKINSON

State

TX

Zip Code

77539-4043

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

154.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 64389773

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$145.80 This
changes the YTD Total to \$154.20

Full Name (Last, First, Middle Initial)

C. CHARLES T. CIRAVOLO

Mailing Address 12 DARBY DR

City

HUNTINGTON STATION

State

NY

Zip Code

11746-4707

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

133.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : 64389795

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$45.80 This changes
the YTD Total to \$133.25

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MELVIN TI CORBETT

Mailing Address 11 MOUNTAIN SPRING RD

City

FARMINGTON

State

CT

Zip Code

06032-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP & CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / 31 / 2014

Transaction ID : 64389831

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$107.20 This changes the YTD Total to \$5000.00

Full Name (Last, First, Middle Initial)

B. RYAN J. BOTNER

Mailing Address 1414 57TH AVE S

City

FARGO

State

ND

Zip Code

58104-7215

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

12 / 31 / 2014

Transaction ID : 64389841

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$595.02 This changes the YTD Total to \$405.00

Full Name (Last, First, Middle Initial)

C. MR. RONALD R ROBINSON

Mailing Address 22 TEN ACRE LN

City

WEST HARTFORD

State

CT

Zip Code

06107-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP ADVANCED MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1039279437825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

28.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JAMES L. MCDANIEL

Mailing Address 11311 HIGHWAY 22

City

PONCHATOULA

State

LA

Zip Code

70454-7323

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR119975537825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. RICARDO M. ALFONSO

Mailing Address 11 KENSINGTON DR

City

NORTH BARRINGTON

State

IL

Zip Code

60010-6960

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1120127737825

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MICHAEL WOODS

Mailing Address 1202 ROSETTE WAY

City

MARIETTA

State

GA

Zip Code

30062-4765

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.10

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1120439837825

Amount of Each Receipt this Period

200.05

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

500.05

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ERIC H WIETSMA

Mailing Address 3 VALLEY VIEW DR

City
WILBRAHAM

State Zip Code
MA 01095-2363

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SVP - RS SALES & WORKSITE EDUCATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1120474537825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. SUSAN J SCANLON

Mailing Address 23 JUDITH DR

City
MANCHESTER

State Zip Code
CT 06040-6517

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1120474937825

Amount of Each Receipt this Period

116.67

P/R Deduction (\$38.89 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MARK ROELLIG

Mailing Address 11 COBTAIL WAY

City
SIMSBURY

State Zip Code
CT 06070-2530

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
EVP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1120475437825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

774.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHRISTOPHER J CASEY

Mailing Address 109 YARMOUTH ST

City

LONGMEADOW

State

MA

Zip Code

01106-3226

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP - LEARNING & PERFORMANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1120476337825

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANDREW W. TODD

Mailing Address 8374 LABONT WAY

City

EDEN PRAIRIE

State

MN

Zip Code

55344-4305

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2560.85

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1135598737825

Amount of Each Receipt this Period

585.97

P/R Deduction (\$260.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. SHANE C. PAROUSE

Mailing Address 33 WILLOW ST

City

FLORAL PARK

State

NY

Zip Code

11001-3407

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1155637237825

Amount of Each Receipt this Period

75.00

P/R Deduction (\$18.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

698.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. DEBRA PALERMINO

Mailing Address 16 RIDGE RD

City
BRISTOL

State Zip Code
CT 06010-7362

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
EVP - HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1156272837825

Amount of Each Receipt this Period

288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. KEITH A PERSON

Mailing Address 4 OLDWOOD RD

City
WILBRAHAM

State Zip Code
MA 01095-2417

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1156278937825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. KELLY A TAYLOR

Mailing Address 9 BLUEBIRD DR

City
ENFIELD

State Zip Code
CT 06082-5703

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
TRAVEL MANAGEMENT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1156279237825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

357.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SEAN GOODEN

Mailing Address 10151 WOODROSE LN

City State Zip Code
HIGHLANDS RANCH CO 80129-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1233883037825

Amount of Each Receipt this Period

350.00

P/R Deduction (\$175.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM E BARTOL

Mailing Address 650 DEEP RIVER RD

City State Zip Code
COLCHESTER CT 06415-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1264213337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ANTHONY SCIACCA

Mailing Address 5619 CHALLISFORD LN

City State Zip Code
CHARLOTTE NC 28226-2627

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1264218137825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

424.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KENNETH MI GACEVICH

Mailing Address 6515 GREENWAY BEND DR

City
CHARLOTTE

State Zip Code
NC 28226-5561

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y
12 31 2014

Transaction ID : PR1264219237825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. CAROLYN ZOLTY

Mailing Address 111 ARGYLE AVE

City
WEST HARTFORD

State Zip Code
CT 06107-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y
12 31 2014

Transaction ID : PR1264219537825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM D. COSTELLO

Mailing Address 37 PEWTER ROCK

City
WEBSTER

State Zip Code
NY 14580-2465

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
12 31 2014

Transaction ID : PR1285635137825

Amount of Each Receipt this Period

833.20

P/R Deduction (\$416.60 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

890.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JASON DEKEUSTER

Mailing Address 2551 38TH AVE NE # UNI

City

MINNEAPOLIS

State

MN

Zip Code

55421-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.01

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1285669037825

Amount of Each Receipt this Period

55.67

P/R Deduction (\$13.64 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. STUART KWASSMAN

Mailing Address 224 MAIN ST

City

NEWINGTON

State

CT

Zip Code

06111-1405

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & ACTUARY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1285751437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. ALETHEA O'DONNELL

Mailing Address 172 SNELL ST

City

AMHERST

State

MA

Zip Code

01002-2556

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1285752337825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

165.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. BRADLEY LUCIDO

Mailing Address 65 ROSEWOOD DR

City

SUFFIELD

State

CT

Zip Code

06078-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP CHIEF COMPLIANCE OFF & DEP GEN C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1285753937825

Amount of Each Receipt this Period

288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN PHILLIPS

Mailing Address 49 MENDON RD

City

SUTTON

State

MA

Zip Code

01590-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1285754137825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GEORGE F. LONG

Mailing Address 23711 LEGEND CRST

City

SAN ANTONIO

State

TX

Zip Code

78260-2600

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1315456437825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

419.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRANCIS M. EVANS

Mailing Address 1222 41ST ST

City
LA GRANGE

State Zip Code
IL 60525-5802

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1322672737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DEAN T BOUDREAU

Mailing Address 6 CLIFFSIDE DR

City
WILBRAHAM

State Zip Code
MA 01095-1620

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SUPPLIER MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1322703637825

Amount of Each Receipt this Period

34.65

P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JEFFREY T PRINCE

Mailing Address 33 HILLSIDE RD

City
NORTHAMPTON

State Zip Code
MA 01060-2119

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1334223437825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.03

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. PHILIP S WELLMAN

Mailing Address 150 N BEACON ST

City

HARTFORD

State

CT

Zip Code

06105-2247

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP & CHIEF COMP OFFICER INST. FUNDS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1342766137825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. GREGORY E DEAVENS

Mailing Address 10 HENLEY COMMONS

City

FARMINGTON

State

CT

Zip Code

06032-1553

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT & CONTROLLER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1342771937825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN W CHANDLER

Mailing Address 118 COLONY RD

City

LONGMEADOW

State

MA

Zip Code

01106-1216

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1355574337825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

542.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL R FANNING

Mailing Address 140 COLONIAL AVE

City
NORTH ANDOVER

State Zip Code
MA 01845-6349

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
EVP - U.S. INSURANCE GROUP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1360837737825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CHRISTOFER P VANDAL

Mailing Address 94 GRAPE ST

City
CHICOPEE

State Zip Code
MA 01013-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
BUSINESS OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1368717137825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHRISTOPHE J. METKIFF

Mailing Address 1600 W 9TH ST

City
WILMINGTON

State Zip Code
DE 19805-5302

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.34

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1368758337825

Amount of Each Receipt this Period

41.68

P/R Deduction (\$8.34 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

641.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JENNIFER P. MANN

Mailing Address 1151 W 14TH PL

City
CHICAGO

State
IL

Zip Code
60608-2845

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1368759237825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. HUGH BARRETT

Mailing Address 58 PONDVIEW DR

City
SPRINGFIELD

State
MA

Zip Code
01118-1145

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1386532037825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. CHRISTINE PEASLEE

Mailing Address 38 CIDER MILL HTS

City
NORTH GRANBY

State
CT

Zip Code
06060-1430

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1387601137825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

223.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 247

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PAULA T RYAN

Mailing Address 28 BELDENWOOD RD

City
SIMSBURYState
CTZip Code
06070-2145FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR1391580637825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. STEPHEN RIXHAM

Mailing Address 2526 SHERWOOD AVE

City
CHARLOTTEState
NCZip Code
28207-2547FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR1417160637825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID GRODIN

Mailing Address 15134 ANDOVER ST

City
SAN LEANDROState
CAZip Code
94579-1752FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR1417170837825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

244.24

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN VACCARO

Mailing Address 18 ANNA MARIE LN

City

E LONGMEADOW

State

MA

Zip Code

01028-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VP - SALES & DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1434639337825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PHILLIP HELD

Mailing Address 61 MCKINLEY AVE

City

WILLIAMSVILLE

State

NY

Zip Code

14221-7134

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1434650237825

Amount of Each Receipt this Period

62.44

P/R Deduction (\$15.63 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ALI BARGHELAME

Mailing Address 1410 S ELIZABETH ST

City

DENVER

State

CO

Zip Code

80210-2423

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.15

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1434658537825

Amount of Each Receipt this Period

133.40

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

426.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID J COUTU

Mailing Address 1 MELLISSA CIR

City
GREENVILLE

State Zip Code
RI 02828-1025

FEC ID number of contributing
federal political committee.

C

Name of Employer
BABSON CAPITAL MANAGEMENT LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1479403837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ROGER PUTNAM

Mailing Address 8 THE GLADE

City
SIMSBURY

State Zip Code
CT 06070-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SENIOR VICE PRESIDENT - OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1479403937825

Amount of Each Receipt this Period

288.45

P/R Deduction (\$96.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM D OBERG

Mailing Address 99 POKANOKET LN

City
MARSHFIELD

State Zip Code
MA 02050-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer
BABSON CAPITAL MANAGEMENT LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1479405037825

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

519.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL MCKENZIE

Mailing Address 10 WESTCHESTER DR

City
CANTON

State Zip Code
MA 02021-2449

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SENIOR VICE PRESIDENT - RS OPERATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1491588237825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. EMILIA L SALES

Mailing Address 44 WOLCOTT AVE

City
W SPRINGFIELD

State Zip Code
MA 01089-1977

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
COMPLIANCE CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1491590437825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DAVID F. GREENBERG

Mailing Address 6103 AQUA AVE APT 70

City
MIAMI BEACH

State Zip Code
FL 33141-5875

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1491604437825

Amount of Each Receipt this Period

61.38

P/R Deduction (\$14.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

199.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DOUGLAS RUSSELL

Mailing Address 347 N STEELE RD

City

WEST HARTFORD

State

CT

Zip Code

06117-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP - STRATEGY AND CORP DEVELOPMEN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3576.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1500908537825

Amount of Each Receipt this Period

1018.98

P/R Deduction (\$339.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DOUGLAS S MORRIN

Mailing Address 24 DENNIS RD

City

LONGMEADOW

State

MA

Zip Code

01106-2340

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1500913337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. CHRIS M MENDOZA

Mailing Address 8 RED GAP RD

City

WILBRAHAM

State

MA

Zip Code

01095-2357

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1500913737825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1093.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 247

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. BERNADETTE HARRIGAN

Mailing Address 66 GOODELL ST

City

BELCHERTOWN

State

MA

Zip Code

01007-9741

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR1500914137825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GREGORY SIRKO

Mailing Address 301 DEMONBREUN ST # 2

City

NASHVILLE

State

TN

Zip Code

37201-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR1500926037825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN M YOUNG

Mailing Address 7 LAMPERCOCK LN

City

LINCOLN

State

RI

Zip Code

02865-4201

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR1541043537825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

209.71

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MARK VIVIANO

Mailing Address 481 MAIN ST

City

WILBRAHAM

State

MA

Zip Code

01095-1662

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP INVESTMENT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1541058537825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. ERICA JA TRUE

Mailing Address 47 COTTAGE ST

City

BELCHERTOWN

State

MA

Zip Code

01007-9666

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1541058637825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CARLOS HERNANDEZ

Mailing Address 8600 SW 84TH AVE

City

MIAMI

State

FL

Zip Code

33143-6912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1541766137825

Amount of Each Receipt this Period

133.96

P/R Deduction (\$33.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

220.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARGEE D. MARTINEZ

Mailing Address 1521 SW 14TH TER

City
MIAMI

State Zip Code
FL 33145-1544

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1541766437825

Amount of Each Receipt this Period

92.73

P/R Deduction (\$22.71 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. BRIAN S SWEENEY

Mailing Address 67 CORNERSTONE DR

City
SOUTH WINDSOR

State Zip Code
CT 06074-2373

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

REGIONAL SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1554644237825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MONTE B. MILLER

Mailing Address 125 LONGVALE DR

City
KNOXVILLE

State Zip Code
TN 37920-6544

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1554866637825

Amount of Each Receipt this Period

52.02

P/R Deduction (\$10.42 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

179.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. TARYN LEONARD

Mailing Address 49 MAGAZINE ST

City
CAMBRIDGEState
MAZip Code
02139-3909FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1560527837825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. NEIL B STANDISH

Mailing Address 17 OLD FLANDERS RD

City
WOODBURYState
CTZip Code
06798-2110FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SYSTEMS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1560527937825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. TODD PICKEN

Mailing Address 4 HAMILTON LN

City
WEATOGUEState
CTZip Code
06089-9764FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CORPORATE VICE PRESIDENT - TREASURY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1560539237825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

161.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 40 OF 247
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. RACHEL JAEGGI

Mailing Address 29 HOFFMANN RD

City
CANTONState
CTZip Code
06019-2151FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR1564484337825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. KEVIN RASCH

Mailing Address 48 FOX DEN RD

City
WEST SIMSBURYState
CTZip Code
06092-2217FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP & ASSISTANT GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR1569232337825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT P. DAMICO

Mailing Address 343 BROOKSBORO DR

City
WEBSTERState
NYZip Code
14580-9775FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR1581828137825

Amount of Each Receipt this Period

122.70

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

411.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ANNE-MARIE SZMYT

Mailing Address 49 GLENN DR

City

WILBRAHAM

State

MA

Zip Code

01095-1439

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - IT PROFESSIONAL SER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1581875037825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DAMON BATES

Mailing Address 5 INGRAHAM RD

City

WELLESLEY

State

MA

Zip Code

02482-6905

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1581880037825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. GARETH ROSS

Mailing Address 82 COTTAGE ST

City

AMHERST

State

MA

Zip Code

01002-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP - ADVANCED BUSINESS ANALYTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1596854837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

253.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. HEIDI XENOPHONTOS

Mailing Address 34 OLD FARMS RD

City

ANDOVER

State

CT

Zip Code

06232-1028

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1596855337825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. KATHLEEN MA ALLEN

Mailing Address 149 LINCOLN RD

City

LONGMEADOW

State

MA

Zip Code

01106-2641

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1596856937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. LORIE VALLE-YANEZ

Mailing Address 575 MOUNTAIN RD

City

WEST HARTFORD

State

CT

Zip Code

06117-1842

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - DIVERSITY & INCLUSION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1606911937825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

184.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. **MR. HERBERT WI WHITAKER**

Mailing Address 58 INDIAN FIELD RD

City
HEBRON

State Zip Code
CT 06248-1337

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP CHANGE LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1606915937825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. **MR. KEVIN P SHERIDAN**

Mailing Address 44 COUNTRY CLUB LN

City
EAST GRANBY

State Zip Code
CT 06026-9637

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VP WORKSITE PRODUCT MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1606916137825

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. **MR. MICHAEL HICKS**

Mailing Address 204 CONE MEADOW CT

City
WEST GRANBY

State Zip Code
CT 06090-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - IT EFFECTIVENESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1606919137825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

254.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROBBIE JO DUNBAR

Mailing Address 8 WOODLAND HTS

City
WARE

State
MA

Zip Code
01082-9756

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

TREASURY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1606920637825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GEORGE BENOIT

Mailing Address 69 JILLIAN WAY

City

WESTPORT

State

MA

Zip Code

02790-4231

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.09

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1619196037825

Amount of Each Receipt this Period

51.13

P/R Deduction (\$15.91 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MARK KNAPP

Mailing Address 4237 VIA MARINA APT 113

City

MARINA DEL REY

State

CA

Zip Code

90292-4552

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1637390737825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

104.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. HUGO X. CARVAJAL

Mailing Address 79 RIDGEVIEW DR

City

WOODLAND PARK

State

NJ

Zip Code

07424-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1637415937825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. VAN M. HESS

Mailing Address 555 35TH ST

City

MANHATTAN BEACH

State

CA

Zip Code

90266-3407

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1637459637825

Amount of Each Receipt this Period

230.80

P/R Deduction (\$46.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL ELDREDGE

Mailing Address 20 COPPER VALLEY CT

City

CHESHIRE

State

CT

Zip Code

06410-1761

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.02

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1645209237825

Amount of Each Receipt this Period

116.67

P/R Deduction (\$38.89 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

409.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. J SCOTT PALMER

Mailing Address 25 DARTMOUTH LN

City

E LONGMEADOW

State

MA

Zip Code

01028-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - RS SYSTEMS

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1039.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1645210037825

Amount of Each Receipt this Period

154.00

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. SRINIVAS DRONAMRAJU

Mailing Address 28 ALLEN RIDGE DR

City

ELLINGTON

State

CT

Zip Code

06029-3666

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP - ENTERPRISE INFORMATION RISK MG

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1645210237825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JACK STEVENS

Mailing Address 9 WILLIAM ST

City

CAZENOVIA

State

NY

Zip Code

13035-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1645246237825

Amount of Each Receipt this Period

62.44

P/R Deduction (\$15.63 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

389.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MATTHEW A. GRIFFITH

Mailing Address 517 NW 156TH CIR

City

EDMOND

State

OK

Zip Code

73013-2087

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1645265337825

Amount of Each Receipt this Period

133.32

P/R Deduction (\$33.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DENNIS STEMPEL

Mailing Address 85 CHRISTOPHER LN

City

FEEDING HILLS

State

MA

Zip Code

01030-2616

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT & GENERAL AUD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1651025537825

Amount of Each Receipt this Period

34.65

P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. AMY LY FERRERO

Mailing Address 42 STONEHILL RD

City

E LONGMEADOW

State

MA

Zip Code

01028-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - CAPABILITY DELIVERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1663791237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

248.73

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. HEATHER SMILEY

Mailing Address 62 KENDALL HILL RD

City
STERLINGState
MAZip Code
01564-1515FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP - RS MARKETING & COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1663792537825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ABIGAIL S. SPAULDING

Mailing Address 144 KENNER AVE

City
NASHVILLEState
TNZip Code
37205-2219FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.68

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1663810137825

Amount of Each Receipt this Period

210.68

P/R Deduction (\$105.34 Monthly)

Full Name (Last, First, Middle Initial)

C. PATRICK D. OLSEN

Mailing Address 5109 GARNER DR

City
DAVENPORTState
IAZip Code
52806-3680FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1663823837825

Amount of Each Receipt this Period

75.00

P/R Deduction (\$37.50 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

458.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAUL E. ROSEN

Mailing Address 124 ISLE OF VENICE DR

City State Zip Code
FORT LAUDERDALE FL 33301-1427

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.36

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1663824037825

Amount of Each Receipt this Period

55.66

P/R Deduction (\$55.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MELISSA J. MORRIS

Mailing Address 4266 20TH ST SW

City State Zip Code
WAVERLY MN 55390-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.65

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1663825737825

Amount of Each Receipt this Period

99.90

P/R Deduction (\$66.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL J. SACHER

Mailing Address 1861 LINDSEY LN

City State Zip Code
CINCINNATI OH 45230-2198

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1044.52

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1672298137825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$83.34 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

322.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. SCOTT BUFFINGTON

Mailing Address 13 MARTINS COVE RD

City
HINGHAM

State Zip Code
MA 02043-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - RS NATIONAL SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1688809837825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANTHONY W. YOUSSEFI

Mailing Address 7928 KIRKFIELD DR

City
NASHVILLE

State Zip Code
TN 37211-4697

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1702300337825

Amount of Each Receipt this Period

77.24

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEANNETTE S. SCHNURMACHER

Mailing Address 12280 NW 4TH ST

City
PLANTATION

State Zip Code
FL 33325-2424

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1702303037825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

255.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROBERT C. CARTY

Mailing Address 1421 GREENFIELD AVE

City

LOS ANGELES

State

CA

Zip Code

90025-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1702305737825

Amount of Each Receipt this Period

175.00

P/R Deduction (\$12.27 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. NICHOLAS S. CHAVIS

Mailing Address 3411 COLLIER CT

City

GLEN ALLEN

State

VA

Zip Code

23060-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1702316637825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRIAN K. VIESELMAYER

Mailing Address 6 YOUNG ST

City

CORTLANDT MANOR

State

NY

Zip Code

10567-1008

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1702332637825

Amount of Each Receipt this Period

124.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

349.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SCOTT GREENFIELD

Mailing Address 58 MIDLAND RD

City

ROSLYN HEIGHTS

State

NY

Zip Code

11577-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1709973037825

Amount of Each Receipt this Period

195.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GREGORY T. FREEMAN

Mailing Address 5901 N MERIDIAN ST

City

INDIANAPOLIS

State

IN

Zip Code

46208-1532

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

603.09

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1710289837825

Amount of Each Receipt this Period

176.05

P/R Deduction (\$50.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. JENNIFER ORZELL

Mailing Address 44 WESTWOODS DR

City

CANTON

State

CT

Zip Code

06019-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1717732337825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

486.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. WILLIAM GA GILLETTE

Mailing Address 136 UNION ST 2ND FLR

City

VERNON ROCKVILLE

State

CT

Zip Code

06066-3023

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

OPERATIONAL SUPPORT SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1727239737825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ADAM G. CLAERBOUT

Mailing Address 7141 DICKINSON LN

City

INDIANAPOLIS

State

IN

Zip Code

46259-5703

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1727248537825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JASON PERCY

Mailing Address 2535 E 26TH ST

City

TULSA

State

OK

Zip Code

74114-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1727261137825

Amount of Each Receipt this Period

61.38

P/R Deduction (\$14.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

134.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. STEPHEN H. GROCHOL

Mailing Address 20 EVA CT

City
SAN MATEO

State Zip Code
CA 94403-4419

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1727281237825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL J. SHEAN

Mailing Address 427 BONNIE BRAE RD

City
HINSDALE

State Zip Code
IL 60521-2815

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1727302637825

Amount of Each Receipt this Period

383.10

P/R Deduction (\$240.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TIMOTHY D. STARK

Mailing Address 4402 POMONA RD

City
DALLAS

State Zip Code
TX 75209-2824

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1728061437825

Amount of Each Receipt this Period

358.25

P/R Deduction (\$69.52 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

791.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. WENDY BENSON

Mailing Address 270 ALLERTON COMMONS LN

City State Zip Code
 BRAintree MA 02184-8248

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MASSACHUSETTS MUTUAL LIFE INS.

Occupation
 VICE PRESIDENT - SALES OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR1728095737825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MATTHEW VERDI

Mailing Address 114 CANTERBURY CIR

City State Zip Code
 EAST LONGMEADOW MA 01028-5709

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MASSACHUSETTS MUTUAL LIFE INS.

Occupation
 AVP DUE DILIGENCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR1728096537825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PAUL W ABDOW

Mailing Address 1945 SUGARLOAF CLUB DR

City State Zip Code
 DULUTH GA 30097-7449

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MASSMUTUAL TRUST COMPANY

Occupation
 AVP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.90

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR1729800737825

Amount of Each Receipt this Period

25.95

P/R Deduction (\$8.65 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. TIMOTHY BARRY

Mailing Address 246 WOLF SWAMP RD

City
LONGMEADOWState
MAZip Code
01106-3240FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP STRATEGIC DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.51

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1737014537825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RICHARD A. JONES

Mailing Address 1153 GRAND CYPRESS CV

City
COLLIERVILLEState
TNZip Code
38017-3464FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1737062637825

Amount of Each Receipt this Period

144.90

P/R Deduction (\$20.45 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THOMAS A. SCHMIDT

Mailing Address 14713 LAMPLIGHT LN

City
EDMONDState
OKZip Code
73013-1591FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1737064537825

Amount of Each Receipt this Period

95.45

P/R Deduction (\$95.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

269.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PHILIP BLUM

Mailing Address 356 BOYLSTON ST

City
CARMEL

State Zip Code
IN 46032-6018

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1737084037825

Amount of Each Receipt this Period

62.44

P/R Deduction (\$15.63 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WALTER GRANT

Mailing Address 15 AMESBURY CV

City
EADS

State Zip Code
TN 38028-3672

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1737102337825

Amount of Each Receipt this Period

199.95

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RON MEAD

Mailing Address 210 EAGLE RD

City
MOUNTAIN TOP

State Zip Code
PA 18707-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1737106137825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

312.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRADLEY T. FAIR

Mailing Address 167 EUNICE ST

City
GUNTOWN

State Zip Code
MS 38849-9303

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1759864037825

Amount of Each Receipt this Period

75.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHNNY LEECH Jr

Mailing Address 1107 CLAYTON AVE

City
TUPELO

State Zip Code
MS 38804-1822

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1762091537825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BAVY U. LOPEZ

Mailing Address 2060 ELIZA GLYNNE LN

City
KNOXVILLE

State Zip Code
TN 37931-3681

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 31 2014

Transaction ID : PR1762108037825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PIERS L. CURRY

Mailing Address 8901 MAGNOLIA CHASE CIR

City State Zip Code
TAMPA FL 33647-2220

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1762115037825

Amount of Each Receipt this Period

114.78

P/R Deduction (\$18.18 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOSEPH M. KLOECKNER

Mailing Address 11741 VILLA SAN MICH

City State Zip Code
LAS VEGAS NV 89138-6015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1774172737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MICHAEL P. CAHILL

Mailing Address 3694 DOTY LN

City State Zip Code
CARMEL IN 46033-4743

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.45

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1774173837825

Amount of Each Receipt this Period

104.00

P/R Deduction (\$20.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

318.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. THERESE SHEWITZ

Mailing Address 1721 VICTORIA POINTE CIR

City
WESTON

State Zip Code
FL 33327-1309

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.65

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1776155737825

Amount of Each Receipt this Period

84.70

P/R Deduction (\$42.35 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DONALD GRIFFITH

Mailing Address 46 PINEWOOD DR

City
LONGMEADOW

State Zip Code
MA 01106-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1779022337825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. AMIR J. POURI

Mailing Address 15021 VENTURA BLVD

City
SHERMAN OAKS

State Zip Code
CA 91403-2442

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.64

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1824621537825

Amount of Each Receipt this Period

69.30

P/R Deduction (\$13.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

269.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. AARON S. CURRY

Mailing Address 2051 HAWK CLIFF PL

City
EDMOND

State Zip Code
OK 73025-1239

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.15

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1824622837825

Amount of Each Receipt this Period

133.40

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. GARY MOELLER

Mailing Address 24 PARK RD

City
SIMSBURY

State Zip Code
CT 06070-2712

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP PROCUREMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1824631637825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. FARHAD HANASAB

Mailing Address 1447 DONHILL DR

City
BEVERLY HILLS

State Zip Code
CA 90210-2216

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1824692637825

Amount of Each Receipt this Period

1375.00

P/R Deduction (\$1375.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1537.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRIAN E. BAKER

Mailing Address 205 ARCHWAY CT

City

LYNCHBURG

State

VA

Zip Code

24502-3159

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1828896237825

Amount of Each Receipt this Period

225.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. D R. BUSHNELL

Mailing Address 10616 LAKE SHORE RD

City

IRVING

State

NY

Zip Code

14081-9549

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1828904637825

Amount of Each Receipt this Period

67.04

P/R Deduction (\$15.91 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PAUL LAGONIGRO

Mailing Address 45 QUEENS PEAK

City

CANTON

State

CT

Zip Code

06019-2641

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP FINANCIAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1829091637825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

320.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHARLES DA TATRO

Mailing Address 49 GEORGE ST

City
MENDONState
MAZip Code
01756-1139FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP & ACTUARY - PRODUCT DEVEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1853990037825

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. LESLIE A. HALSTEAD

Mailing Address 4511 MEREDITH CREEK DR

City
GLEN ALLENState
VAZip Code
23060-3421FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1854024737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. DANIEL S. BLUM

Mailing Address 7633 MADELINE WAY

City
CITRUS HEIGHTSState
CAZip Code
95610-6704FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1857115437825

Amount of Each Receipt this Period

40.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

255.41

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD C MARTIN

Mailing Address 169 PENN DR

City

WEST HARTFORD

State

CT

Zip Code

06119-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

ADVANCED MARKETS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1857148937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DONALD L LEVI

Mailing Address 6802 MINUTEMAN CIR

City

CRYSTAL LAKE

State

IL

Zip Code

60012-3142

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SYSTEMS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1869386237825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. FRANCENE KA SALMA

Mailing Address 4 FARNHAM RD

City

WEST HARTFORD

State

CT

Zip Code

06119-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1873733537825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROBERT DURE

Mailing Address 567 CLEAR CREEK DR

City State Zip Code
 DANVILLE IN 46122-9006

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 12 31 2014

Transaction ID : PR1873749437825

Amount of Each Receipt this Period

124.96

P/R Deduction (\$15.63 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. KEVIN C. GUTWEIN

Mailing Address 3713 WEATHER STONE XING

City State Zip Code
 ZIONSVILLE IN 46077-3803

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.36

Date of Receipt

M M / D D / Y Y Y Y
 12 31 2014

Transaction ID : PR1873751037825

Amount of Each Receipt this Period

79.56

P/R Deduction (\$20.86 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBIN BERNSTEIN

Mailing Address 235 SANFORD AVE

City State Zip Code
 PALM BEACH FL 33480-3619

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 12 31 2014

Transaction ID : PR1873754137825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

254.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LYNN J. PELL

Mailing Address 3000 LINCOLN ST

City
CAMP HILLState Zip Code
PA 17011-2830FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1903656937825

Amount of Each Receipt this Period

131.02

P/R Deduction (\$13.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PHILIP ROBERTS

Mailing Address 650 N GLASSELL ST

City
ORANGEState Zip Code
CA 92867-6773FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1903660437825

Amount of Each Receipt this Period

104.38

P/R Deduction (\$19.48 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN FR KENNEDY

Mailing Address 51 ANDREW DR

City
CANTONState Zip Code
CT 06019-5001FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - DISTRIBUTION STRATEG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR1913873337825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

350.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MELVIN TI CORBETT

Mailing Address 11 MOUNTAIN SPRING RD

City

FARMINGTON

State

CT

Zip Code

06032-1612

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP & CHIEF INVESTMENT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1929995837825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MARC LIVERNOIS

Mailing Address 2795 N CEDARIDGE DR

City

MIDLAND

State

MI

Zip Code

48642-8896

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1930023337825

Amount of Each Receipt this Period

214.78

P/R Deduction (\$161.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. EDWARD KAESER

Mailing Address 1108 BLUE SPRINGS RD

City

FRANKLIN

State

TN

Zip Code

37069-6937

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.45

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1930041637825

Amount of Each Receipt this Period

85.45

P/R Deduction (\$42.73 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

877.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ELEANOR PA WILLIAMS

Mailing Address 57 CLAIRMONT ST

City

LONGMEADOW

State

MA

Zip Code

01106-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1934307437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ERIC A ENNES

Mailing Address 105 RIVERSIDE DR

City

WRENTHAM

State

MA

Zip Code

02093-1455

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1934311237825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. TAKESHA KE POLLOCK

Mailing Address 3306 MORELAND CT

City

FORT MILL

State

SC

Zip Code

29715-8328

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR1934313037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

86.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CHRISTINE FREDERICK

Mailing Address 2 EMERSON LN

City
GRANBY

State
CT

Zip Code
06035-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.10

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1934313137825

Amount of Each Receipt this Period

86.55

P/R Deduction (\$28.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANIEL GOLDSMITH

Mailing Address 1667 ARONA ST

City
SAINT PAUL

State
MN

Zip Code
55108-2351

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1934322537825

Amount of Each Receipt this Period

312.50

P/R Deduction (\$62.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT J. SMITH

Mailing Address 491 PASEO SOLEADO

City
PALM SPRINGS

State
CA

Zip Code
92264-8477

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.44

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1934331937825

Amount of Each Receipt this Period

340.88

P/R Deduction (\$7.59 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

739.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LALIT JALLAN

Mailing Address 2114 CASTLEHEATH CT

City
KATYState
TXZip Code
77450-6072FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1934335837825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CARL PA STEINHILBER

Mailing Address 158 CHARLES ST

City
TOLLANDState
CTZip Code
06084-2258FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.14

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1947062437825

Amount of Each Receipt this Period

66.69

P/R Deduction (\$22.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DOMINIC BLUE

Mailing Address 28 EASTHAM LANE

City
LONGMEADOWState
MAZip Code
01106-2342FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP & ASSISTANT GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1947062937825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

197.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. HARRY ARMON

Mailing Address 863 REMSENS LN

City

OYSTER BAY

State

NY

Zip Code

11771-4508

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1947068537825

Amount of Each Receipt this Period

92.73

P/R Deduction (\$22.71 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID COSTELLO

Mailing Address 61 ELLSWORTH ST

City

MEDFORD

State

MA

Zip Code

02155-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.05

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1947084337825

Amount of Each Receipt this Period

114.74

P/R Deduction (\$17.05 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL BOUYEA

Mailing Address 2 TIGGER LANE

City

SOUTH HADLEY

State

MA

Zip Code

01075-3315

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP MASSMUTUAL WAY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.14

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1961247237825

Amount of Each Receipt this Period

66.69

P/R Deduction (\$22.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

274.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MICHAEL MODABERPOUR

Mailing Address 625 S FAIRFAX AVE

City

LOS ANGELES

State

CA

Zip Code

90036-3609

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1961258737825

Amount of Each Receipt this Period

209.08

P/R Deduction (\$26.14 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEVEN E. CHICK

Mailing Address 124 ELM ST

City

WILLIAMSTOWN

State

MA

Zip Code

01267-2576

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1965200737825

Amount of Each Receipt this Period

165.92

P/R Deduction (\$27.27 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KIA E. SAIDNIA

Mailing Address 468 S ROXBURY DR

City

BEVERLY HILLS

State

CA

Zip Code

90212-4149

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1965213437825

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

675.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BOBBY MCCLOUD

Mailing Address 6553 93RD ST

City

LUBBOCK

State

TX

Zip Code

79424-6780

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1965221837825

Amount of Each Receipt this Period

67.04

P/R Deduction (\$15.91 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN E LAMB

Mailing Address 194 RISING TRAIL DR

City

MIDDLETOWN

State

CT

Zip Code

06457-1663

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

ARCHITECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1976991937825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOSEPH C. GODSEY

Mailing Address 730 LACHMAN LN

City

PACIFIC PLSDS

State

CA

Zip Code

90272-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR1980161037825

Amount of Each Receipt this Period

184.65

P/R Deduction (\$46.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

274.79

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. FLORENCE WHITFIELD

Mailing Address 1339 SPRINGFIELD ST UNIT 565

City

FEEDING HILLS

State

MA

Zip Code

01030-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1983835437825

Amount of Each Receipt this Period

33.36

P/R Deduction (\$11.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MATTHEW BURKS

Mailing Address 2687 S BROOKSIDE BLU

City

LAKELAND

State

FL

Zip Code

33813-0820

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1983859237825

Amount of Each Receipt this Period

200.00

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOSEPH J. FEMIA

Mailing Address 59 VILLA AVE APT 2R

City

YONKERS

State

NY

Zip Code

10704-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR1993210537825

Amount of Each Receipt this Period

208.33

P/R Deduction (\$166.66 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

441.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. IAN M FOWLER

Mailing Address 301 CHEROKEE RD

City

LAKE FOREST

State

IL

Zip Code

60045-3062

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2006647537825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JAMES E. MASUR

Mailing Address 66 THORNTON RD

City

NEEDHAM

State

MA

Zip Code

02492-4330

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2006654037825

Amount of Each Receipt this Period

287.50

P/R Deduction (\$287.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RYAN J. BOTNER

Mailing Address 1414 57TH AVE S

City

FARGO

State

ND

Zip Code

58104-7215

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2006660037825

Amount of Each Receipt this Period

333.34

P/R Deduction (\$266.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

736.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOSHUA BACH

Mailing Address 101 28TH AVE NE

City

FARGO

State

ND

Zip Code

58102-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.36

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR200660437825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SCOTT MOSHER

Mailing Address N7941 COUNTY ROAD N

City

NEW GLARUS

State

WI

Zip Code

53574-9714

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.32

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2008481537825

Amount of Each Receipt this Period

95.88

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TOMASZ ALEMANY ROJAS

Mailing Address 145 GABLES BLVD

City

WESTON

State

FL

Zip Code

33326-5501

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2008497837825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

279.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 77 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SCOTT A. GOHRES

Mailing Address 950 DEWING AVE APT 1

City
LAFAYETTE

State Zip Code
CA 94549-4256

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2011974737825

Amount of Each Receipt this Period

144.69

P/R Deduction (\$16.08 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MARC R BELLETSKY

Mailing Address 9 MOOSEHORN HILL RD

City
WEST GRANBY

State Zip Code
CT 06090-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

ADVANCED MARKETS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2012004137825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. WILLIAM S. ROBERTSON

Mailing Address 5100 FM 126

City
NOLAN

State Zip Code
TX 79537-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.14

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2016623337825

Amount of Each Receipt this Period

450.09

P/R Deduction (\$2.14 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

640.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. AFSHIN MISSAGHIEH

Mailing Address 1926 GREENFIELD AVE

City

LOS ANGELES

State

CA

Zip Code

90025-5712

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.67

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2016630437825

Amount of Each Receipt this Period

280.64

P/R Deduction (\$30.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RENEE C. ADKINS

Mailing Address 102 FIFTH ST

City

UNION

State

MS

Zip Code

39365-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2016634637825

Amount of Each Receipt this Period

40.90

P/R Deduction (\$20.45 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ANTHONY FIORE

Mailing Address 31314 E RUTLAND ST

City

BEVERLY HILLS

State

MI

Zip Code

48025-5424

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.45

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2023714237825

Amount of Each Receipt this Period

116.36

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

437.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOHN M. CORBETT

Mailing Address 16130 NORTH 170TH LN

City

SURPRISE

State

AZ

Zip Code

85388-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

BUSINESS OPERATIONS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030664837825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CARLO GUERRERA

Mailing Address 1 WHISPERING ROD ROAD

City

UNIONVILLE

State

CT

Zip Code

06085-1436

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - KEY ACCOUNTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030677737825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. ANN MARIE WHALEN

Mailing Address 7100 NW 48TH CT

City

LAUDERHILL

State

FL

Zip Code

33319-3421

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

BUSINESS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030677937825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

75.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LOUISE PROVENZANO

Mailing Address 316 WOLCOTT STREET

City
BRISTOL

State Zip Code
CT 06010-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2030698637825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. LUIS O CONCEPCION

Mailing Address 12 HAWKS RIDGE

City
AVON

State Zip Code
CT 06001-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2030723137825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT C TRENERRY

Mailing Address 3009 VIA MERIDIANA

City
HENDERSON

State Zip Code
NV 89052-3842

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
CLIENT RELATIONSHIP MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR2030741937825

Amount of Each Receipt this Period

33.36

P/R Deduction (\$11.12 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

137.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. WILLIAM T. ABRAMOWICZ

Mailing Address 723 TAFT ROAD

City

HINSDALE

State

IL

Zip Code

60521-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

REGIONAL SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2030743237825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DENNIS E. GLYNN

Mailing Address 37 DANIEL RIDGE

City

WESTFIELD

State

MA

Zip Code

01085-4151

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

PRODUCT MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.14

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2030750537825

Amount of Each Receipt this Period

66.69

P/R Deduction (\$22.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. TROY K. ENGLERTH

Mailing Address 7253 W MELINDA LANE

City

GLENDALE

State

AZ

Zip Code

85308-9538

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP GROUP BUSINESS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR2030750737825

Amount of Each Receipt this Period

83.34

P/R Deduction (\$27.78 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

207.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 82 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PATRICIA L. HARRIS

Mailing Address 22 CHAROLAIS WAY

City

BURLINGTON

State

CT

Zip Code

06013-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - RS PRODUCT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030764437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ARTHUR SCOLARI

Mailing Address 154 FIELD RD

City

LONGMEADOW

State

MA

Zip Code

01106-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.46

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030797037825

Amount of Each Receipt this Period

91.00

P/R Deduction (\$58.48 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BENJAMIN T. WELCH

Mailing Address 4520 TIDDLE LN

City

PFLUGERVILLE

State

TX

Zip Code

78660-3649

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.01

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2030802237825

Amount of Each Receipt this Period

155.56

P/R Deduction (\$38.89 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 83 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JASON AURICCHIO

Mailing Address 6984 SW 152ND CT

City
MIAMI

State
FL

Zip Code
33193-2209

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2038709037825

Amount of Each Receipt this Period

102.78

P/R Deduction (\$25.17 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SAHAND ELMTALAB

Mailing Address 4295 WESTON LN N

City

PLYMOUTH

State

MN

Zip Code

55446-2502

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2038727637825

Amount of Each Receipt this Period

60.48

P/R Deduction (\$14.18 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GORDON MACKAY

Mailing Address 5 RUBY DR

City

LAKEVILLE

State

MA

Zip Code

02347-1875

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2041710237825

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

463.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GLENN W. STARKEY

Mailing Address 8012 87TH AVE FL 2

City

WOODHAVEN

State

NY

Zip Code

11421-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

203.14

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2042779637825

Amount of Each Receipt this Period

203.14

P/R Deduction (\$22.73 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS BLOCK

Mailing Address 2720 S VEITCH ST

City

ARLINGTON

State

VA

Zip Code

22206-3052

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

291.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2045502237825

Amount of Each Receipt this Period

124.95

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. RACHEL AY PARENT

Mailing Address 5 PEMBROKE DR

City

SUFFIELD

State

CT

Zip Code

06078-2096

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT PROGRAM MGMT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2052377637825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$55.56 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

494.77

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL E HENDERLONG

Mailing Address 41 BEAVER CREEK CT

City

FAR HILLS

State

NJ

Zip Code

07931-2594

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2052379337825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. SUSAN JE GARRETT

Mailing Address 11 SOMERSET LN

City

SIMSBURY

State

CT

Zip Code

06070-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - HR CONSULTIN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2076523937825

Amount of Each Receipt this Period

250.05

P/R Deduction (\$83.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MARTIN J. MCALPIN

Mailing Address 10762 ASHLEY LN

City

SAINT PAUL

State

MN

Zip Code

55129-6903

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR2076543137825

Amount of Each Receipt this Period

199.95

P/R Deduction (\$149.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

565.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. SCOTT ED SEBASTIAN

Mailing Address 43 LEXINGTON RD

City

WEST HARTFORD

State

CT

Zip Code

06119-1748

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2106072837825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. SHANNON CAMINITI

Mailing Address 64 FERNWOOD RD

City

TOLLAND

State

CT

Zip Code

06084-2279

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.20

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2119891637825

Amount of Each Receipt this Period

41.70

P/R Deduction (\$13.90 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. SEARS AN MERRITT

Mailing Address 18 CANTERBURY LN

City

GROTON

State

MA

Zip Code

01450-4242

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP, DATA SCIENTIST PROGRAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.20

Date of Receipt

12 / 31 / 2014

Transaction ID : PR2139274437825

Amount of Each Receipt this Period

41.70

P/R Deduction (\$13.90 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

112.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. TYLER J. WOODWARD

Mailing Address 6051 PASSING SKY DR

City State Zip Code
 COLORADO SPGS CO 80911-3875

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.45

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR2139370637825

Amount of Each Receipt this Period

66.70

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ADAM CHERNEY

Mailing Address 1099 DELMAR AVE

City State Zip Code
 FRANKLIN SQ NY 11010-2740

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR2159503137825

Amount of Each Receipt this Period

200.00

P/R Deduction (\$66.70 Monthly)

Full Name (Last, First, Middle Initial)

C. MR. SCOTT D BROWN

Mailing Address 479 CHESTNUT ST

City State Zip Code
 WABAN MA 02468-1204

FEC ID number of contributing federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.02

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR2166460237825

Amount of Each Receipt this Period

416.67

P/R Deduction (\$138.89 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

683.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ALAN L. MELTZER

Mailing Address 2000 S OCEAN BLVD

City

BOCA RATON

State

FL

Zip Code

33432-8068

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789845137825

Amount of Each Receipt this Period

869.52

P/R Deduction (\$217.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ANTHONY R. STARR

Mailing Address 2 PAISLEY CT

City

SAVANNAH

State

GA

Zip Code

31411-3078

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789851337825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRINEY LEE CLORE

Mailing Address 5064 SWITCH GRASS LN

City

NAPERVILLE

State

IL

Zip Code

60564-5367

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789859937825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

969.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRUCE T. RIDDLE

Mailing Address 3702 E 63RD ST

City
TULSA

State
OK

Zip Code
74136-1523

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789860737825

Amount of Each Receipt this Period

212.50

P/R Deduction (\$106.25 Monthly)

Full Name (Last, First, Middle Initial)

B. BRYAN S. HANNING

Mailing Address 1 N SANDPIPER ST

City
WICHITA

State
KS

Zip Code
67230-6626

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789861037825

Amount of Each Receipt this Period

361.05

P/R Deduction (\$180.52 Monthly)

Full Name (Last, First, Middle Initial)

C. B H. ERSTAD Jr.

Mailing Address 2510 S NANTUCKET WAY

City
BOISE

State
ID

Zip Code
83706-5095

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.91

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789861637825

Amount of Each Receipt this Period

98.86

P/R Deduction (\$15.91 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

672.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 90 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. CASSANDRA L. WILSON

Mailing Address 3909 PATTY LN

City
BETHANY

State Zip Code
OK 73008-3046

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789865037825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHE J. FLYNN

Mailing Address 126 JERICHO RD

City
SCITUATE

State Zip Code
MA 02066-3558

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789870937825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. CHRISTOPHE L. HEERDEGEN

Mailing Address 6862 SECTION RD

City
OTTAWA LAKE

State Zip Code
MI 49267-9551

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789871337825

Amount of Each Receipt this Period

111.38

P/R Deduction (\$27.27 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

223.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. COREY A. SCHNEIDER

Mailing Address 20 STRATTON RD

City
SCARSDALEState
NYZip Code
10583-7555FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789873237825

Amount of Each Receipt this Period

416.68

P/R Deduction (\$204.17 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DANIEL M. SMITH

Mailing Address 90 DOLAN DR

City
GUILFORDState
CTZip Code
06437-2350FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789877637825

Amount of Each Receipt this Period

166.55

P/R Deduction (\$83.27 Monthly)

Full Name (Last, First, Middle Initial)

C. DANIEL DILLINGHAM

Mailing Address 31484 LOST HOLLOW RD

City
BEVERLY HILLSState
MIZip Code
48025-4410FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789877737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

683.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAVID G. CARVER

Mailing Address 100 OCEANGATE STE 800

City

LONG BEACH

State

CA

Zip Code

90802-4369

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789881337825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. DAVID L. DAVIS

Mailing Address 4211 83RD AVE SE

City

MERCER ISLAND

State

WA

Zip Code

98040-4015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789882237825

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. DAVID M. BECKER

Mailing Address 1121 WOODBERRY CIR

City

STATE COLLEGE

State

PA

Zip Code

16803-2233

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789885637825

Amount of Each Receipt this Period

133.45

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

433.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DEANNA FILOSA

Mailing Address 94 HOLST DR W

City State Zip Code
HUNTINGTON NY 11743-3940

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789886837825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DENNIS J. FLANAGAN

Mailing Address 4366 ALTHEA WAY

City State Zip Code
WEST PALM BEACH FL 33410-5408

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789888537825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DONALD G. OLSEN

Mailing Address 709 JEFFERSON ST

City State Zip Code
HANOVER IL 61041-9678

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.38

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789891837825

Amount of Each Receipt this Period

32.96

P/R Deduction (\$6.82 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 94 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DONALD J. HARRINGTON

Mailing Address 4150 VIA DOLCE APT 1

City

MARINA DEL REY

State

CA

Zip Code

90292-5291

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789892337825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. EDDIE D. ROBERTS

Mailing Address 2906 LAKEHURST RD

City

SPICEWOOD

State

TX

Zip Code

78669-6886

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789895437825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. EDWARD J. LEBOLD

Mailing Address 945 OAK TER

City

LAKE OSWEGO

State

OR

Zip Code

97034-4664

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789897737825

Amount of Each Receipt this Period

206.93

P/R Deduction (\$41.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

456.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. EDWARD P. SUNTER Jr.

Mailing Address 106 BROOKHAVEN DR

City

E LONGMEADOW

State

MA

Zip Code

01028-1409

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789898037825

Amount of Each Receipt this Period

55.66

P/R Deduction (\$13.64 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. FORREST E. WILLIAMS

Mailing Address 1909 WOODSIDE LN

City

VIRGINIA BCH

State

VA

Zip Code

23454-1031

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789904437825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GARY L. EICKHORST

Mailing Address 2425 W 67TH ST

City

MISSION HILLS

State

KS

Zip Code

66208-2205

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789911737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

205.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 96 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GENE S. TYRRELL

Mailing Address 1657 SOUTHPORT DR

City
RIVERSIDE

State Zip Code
CA 92506-5450

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.65

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789913337825

Amount of Each Receipt this Period

196.65

P/R Deduction (\$98.32 Monthly)

Full Name (Last, First, Middle Initial)

B. GEORGE P. BECKNELL III

Mailing Address 201 CRESCENT ST

City
SAN ANTONIO

State Zip Code
TX 78209-4406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789915637825

Amount of Each Receipt this Period

316.55

P/R Deduction (\$158.27 Monthly)

Full Name (Last, First, Middle Initial)

C. GEORGE V. CAYLOR

Mailing Address 2460 RIVERMONT AVE

City
LYNCHBURG

State Zip Code
VA 24503-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789915837825

Amount of Each Receipt this Period

133.35

P/R Deduction (\$66.67 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

646.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 97 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GREGORY F. CARROLL

Mailing Address 6016 CAIRN TER

City

BETHESDA

State

MD

Zip Code

20817-5406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789921437825

Amount of Each Receipt this Period

300.00

P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial)

B. HOWARD N. BIENENFELD

Mailing Address 5921 SW 33RD LN

City

FT LAUDERDALE

State

FL

Zip Code

33312-6364

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789932737825

Amount of Each Receipt this Period

316.55

P/R Deduction (\$158.27 Monthly)

Full Name (Last, First, Middle Initial)

C. IVAN C. HINRICHS

Mailing Address 2418 LA MAISON DR

City

CHARLOTTE

State

NC

Zip Code

28226-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789935237825

Amount of Each Receipt this Period

83.28

P/R Deduction (\$20.82 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

699.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JAMES M. JENSEN

Mailing Address 7903 COPELAND RD

City
ODESSA

State Zip Code
FL 33556-3261

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789937137825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JAMES C. BROCKE

Mailing Address 5940 CHAPMANS TRL

City
CARMEL

State Zip Code
IN 46033-8644

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.91

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789941837825

Amount of Each Receipt this Period

98.86

P/R Deduction (\$15.91 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JAMES H. MCGINNIS

Mailing Address 2108 DUDLEY AVE

City
PARKERSBURG

State Zip Code
WV 26101-3406

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.55

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789946837825

Amount of Each Receipt this Period

77.75

P/R Deduction (\$38.87 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

276.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 99 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JAMES P. GROOMS

Mailing Address 660 OWNBY DR

City

GATLINBURG

State

TN

Zip Code

37738-5767

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789950737825

Amount of Each Receipt this Period

41.68

P/R Deduction (\$10.42 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JANET G. FLEISHMAN

Mailing Address 168 BELLTOWN RD

City

STAMFORD

State

CT

Zip Code

06905-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789955537825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY H. DUNCAN

Mailing Address 39 DEACON PL

City

CRESSKILL

State

NJ

Zip Code

07626-1140

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789959337825

Amount of Each Receipt this Period

245.00

P/R Deduction (\$122.50 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 100 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOHN C. SKOOG

Mailing Address 4945 PINE LN

City
EAGAN

State Zip Code
MN 55123-4911

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.38

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789968737825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN L. ROSENHEIM

Mailing Address 1102 WISTERIA WAY

City
WAYLAND

State Zip Code
MA 01778-2845

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.77

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789974237825

Amount of Each Receipt this Period

41.80

P/R Deduction (\$10.45 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN M. RUCKEL

Mailing Address 524 INWOOD LN

City
NACOGDOCHES

State Zip Code
TX 75965-1929

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789975537825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOHN N. SCHNEIDER

Mailing Address 2524 MAPLE TREE DR

City

SAINT CHARLES

State

MO

Zip Code

63303-4334

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789975637825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$11.33 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN R. DEGEN

Mailing Address 1231 W 66TH ST

City

KANSAS CITY

State

MO

Zip Code

64113-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789976837825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOE E. YOUNG Jr.

Mailing Address 32 STONY RDG

City

ASHEVILLE

State

NC

Zip Code

28804-1854

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR789982937825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

246.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. KARL J. FEITELBERG

Mailing Address 175 DERBY ST UNIT 33

City
HINGHAM

State Zip Code
MA 02043-4007

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.77

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789989137825

Amount of Each Receipt this Period

210.77

P/R Deduction (\$105.38 Monthly)

Full Name (Last, First, Middle Initial)

B. KATHLEEN L. DEGEN

Mailing Address 1231 W 66TH ST

City
KANSAS CITY

State Zip Code
MO 64113-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789989237825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. KIRK A. RYDER

Mailing Address 3815 TRIMBLE RD

City
NASHVILLE

State Zip Code
TN 37215-3101

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR789996837825

Amount of Each Receipt this Period

83.20

P/R Deduction (\$41.60 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

393.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. **LANGHORNE H. MEEM II**

Mailing Address 215 OLD ORCHARD LN

City

RICHMOND

State

VA

Zip Code

23226-2246

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR789998337825

Amount of Each Receipt this Period

84.00

P/R Deduction (\$42.00 Monthly)

Full Name (Last, First, Middle Initial)

B. **LAWRENCE M. TOMCZAK**

Mailing Address 5938 SWAN CREEK DR

City

TOLEDO

State

OH

Zip Code

43614-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790001737825

Amount of Each Receipt this Period

166.55

P/R Deduction (\$83.27 Monthly)

Full Name (Last, First, Middle Initial)

C. **LAWRENCE N. HOLDEN III**

Mailing Address 601 ARBOR RD

City

WINSTON SALEM

State

NC

Zip Code

27104-2331

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.89

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790001837825

Amount of Each Receipt this Period

188.89

P/R Deduction (\$94.44 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

439.44

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LOUIS F. GRAMMES

Mailing Address 990 GRANDON WAY

City

MECHANICSBURG

State

PA

Zip Code

17050-9190

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.90

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790009037825

Amount of Each Receipt this Period

93.00

P/R Deduction (\$46.50 Monthly)

Full Name (Last, First, Middle Initial)

B. LOUIS BELINKIE

Mailing Address 1711 CLOISTER DR

City

RICHMOND

State

VA

Zip Code

23238-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790009637825

Amount of Each Receipt this Period

40.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. LYNN B. WESTBROOK Jr.

Mailing Address 6412 E ONEIDA ST

City

WICHITA

State

KS

Zip Code

67206-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.38

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790010437825

Amount of Each Receipt this Period

58.40

P/R Deduction (\$14.60 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MICHAEL G. FOGARTY

Mailing Address 52 RICHMOND DR

City

SAVANNAH

State

GA

Zip Code

31406-7541

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790028137825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MICHAEL O. BROWN

Mailing Address 6512 NE 113TH ST

City

EDMOND

State

OK

Zip Code

73013-8351

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790030537825

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MITCHELL B. STARR

Mailing Address 9800 SW 4TH ST

City

PLANTATION

State

FL

Zip Code

33324-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.03

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790035437825

Amount of Each Receipt this Period

917.30

P/R Deduction (\$459.05 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1137.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MOLLY G. MEEM

Mailing Address 215 OLD ORCHARD LN

City

RICHMOND

State

VA

Zip Code

23226-2246

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790035837825

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. NADER A. ISSA

Mailing Address 1533 KOCH LN

City

SAN JOSE

State

CA

Zip Code

95125-4852

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790036937825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. PATRICK J. DOLAN

Mailing Address 34 BERKELEY PL

City

GLEN ROCK

State

NJ

Zip Code

07452-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.69

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790043737825

Amount of Each Receipt this Period

254.69

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

474.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAUL A. DECOURSEY

Mailing Address 4605 N MERIDIAN ST

City

INDIANAPOLIS

State

IN

Zip Code

46208-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790044837825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PAUL H. HERZOG

Mailing Address 900 HIGHLAND CT

City

GERMANTOWN HILLS

State

IL

Zip Code

61548-9056

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790046237825

Amount of Each Receipt this Period

184.65

P/R Deduction (\$46.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PETER M. LEWIS

Mailing Address 230 LITTLE ROUND TOP

City

BULVERDE

State

TX

Zip Code

78163-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.35

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790051337825

Amount of Each Receipt this Period

99.35

P/R Deduction (\$49.67 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

346.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 108 OF 247

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PHILIP J. SPRAGUE

Mailing Address 1308 SUNSET RDG

City

WATERTOWN

State

NY

Zip Code

13601-4438

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR790054737825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT R. CUSHING

Mailing Address 696 COMMERCIAL ST

City

WEYMOUTH

State

MA

Zip Code

02189-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

625.88

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR790056337825

Amount of Each Receipt this Period

237.03

P/R Deduction (\$118.51 Monthly)

Full Name (Last, First, Middle Initial)

C. RALEIGH H. LANG

Mailing Address 6727 RAINBOW AVE

City

MISSION HILLS

State

KS

Zip Code

66208-2265

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

955.60

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR790056937825

Amount of Each Receipt this Period

288.80

P/R Deduction (\$144.40 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. RAYMOND E. WELSH

Mailing Address 913 17TH RD

City
PENDER

State Zip Code
NE 68047-5001

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790060737825

Amount of Each Receipt this Period

58.30

P/R Deduction (\$29.15 Monthly)

Full Name (Last, First, Middle Initial)

B. RICHARD D. MAYS

Mailing Address 3238 HEATHERFIELD CT

City
NEWBURY PARK

State Zip Code
CA 91320-5023

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790065337825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. RICHARD I. KARCHEFSKY

Mailing Address 9839 PALMA VISTA WAY

City
BOCA RATON

State Zip Code
FL 33428-3528

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790066937825

Amount of Each Receipt this Period

129.16

P/R Deduction (\$31.10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

287.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. RICHARD P. VANBENSCHOTEN

Mailing Address 875 5TH AVE APT 3A

City
NEW YORK

State Zip Code
NY 10065-4952

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790069037825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT L. HOMER

Mailing Address 10751 WILSHIRE AVE NE

City
ALBUQUERQUE

State Zip Code
NM 87122-3138

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790081637825

Amount of Each Receipt this Period

184.65

P/R Deduction (\$46.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT M. SMITH

Mailing Address 1487 S CREST DR

City
LOS ANGELES

State Zip Code
CA 90035-3339

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790083637825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

501.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 111 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROBERT T. SINKS

Mailing Address 3428 HAMPTON AVE

City

NASHVILLE

State

TN

Zip Code

37215-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790086637825

Amount of Each Receipt this Period

791.55

P/R Deduction (\$395.77 Monthly)

Full Name (Last, First, Middle Initial)

B. RODNEY E. JEWELL

Mailing Address 5420 DECATUR ST

City

OMAHA

State

NE

Zip Code

68104-4931

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790090937825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RONNIE E. HUIE

Mailing Address 7740 SWEETWIND CIR

City

FAIR OAKS RANCH

State

TX

Zip Code

78015-4569

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790095537825

Amount of Each Receipt this Period

166.55

P/R Deduction (\$83.27 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

1008.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SCOTT C. CURRAN

Mailing Address 9 TRIUMPH CT

City

FLANDERS

State

NJ

Zip Code

07836-4404

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790102937825

Amount of Each Receipt this Period

316.55

P/R Deduction (\$158.27 Monthly)

Full Name (Last, First, Middle Initial)

B. SCOTT P. RIDER

Mailing Address 4888 MCGINNIS RD

City

DELAWARE

State

OH

Zip Code

43015-9132

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790103637825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEPHEN D. ESTLER

Mailing Address 2177 NE 63RD ST

City

FT LAUDERDALE

State

FL

Zip Code

33308-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790109437825

Amount of Each Receipt this Period

333.36

P/R Deduction (\$133.34 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

799.91

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 113 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. THOMAS L. DELEOT

Mailing Address 987 WELLINGTON RD

City

WINSTON SALEM

State

NC

Zip Code

27106-5622

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.05

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790124837825

Amount of Each Receipt this Period

160.60

P/R Deduction (\$80.30 Monthly)

Full Name (Last, First, Middle Initial)

B. THOMAS W. NAYLOR

Mailing Address 11304 SPRING MEADOW LN

City

SAN DIEGO

State

CA

Zip Code

92128-6332

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790128137825

Amount of Each Receipt this Period

61.38

P/R Deduction (\$14.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TODD J. MCDONALD

Mailing Address 11 EAGLE RIDGE DR

City

TROY

State

NY

Zip Code

12180-7167

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1552.19

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790131837825

Amount of Each Receipt this Period

328.15

P/R Deduction (\$88.55 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 114 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. VICTOR IANNELLI

Mailing Address 134 EDWARDS RD

City

FREEHOLD

State

NJ

Zip Code

07728-1313

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790134637825

Amount of Each Receipt this Period

625.00

P/R Deduction (\$225.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. WILLIAM E. OWENS

Mailing Address 208 CONVENTION DR

City

VIRGINIA BCH

State

VA

Zip Code

23462-6027

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790135437825

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)

C. WILLIAM G. MCPHERSON

Mailing Address 1276 PARNELL AVE NE

City

LOWELL

State

MI

Zip Code

49331-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790135537825

Amount of Each Receipt this Period

42.50

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

747.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 115 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WILLIAM B. KING

Mailing Address 40 CALYPSO RD

City
MONETA

State Zip Code
VA 24121-5391

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790140837825

Amount of Each Receipt this Period

95.46

P/R Deduction (\$21.59 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ALAN L BLAIS

Mailing Address 20 SHADY DELL LN

City
SOMERS

State Zip Code
CT 06071-2136

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790151837825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ALBERT R KINGAN

Mailing Address 3325 W DESERT VISTA TRL

City
PHOENIX

State Zip Code
AZ 85083-5875

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP ADVANCED MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790152737825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ANTHONY D FROGAMENI

Mailing Address 31 COVENTRY LN

City

AGAWAM

State

MA

Zip Code

01001-3570

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP INVESTMENT OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.07

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790157037825

Amount of Each Receipt this Period

44.13

P/R Deduction (\$14.71 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ANTONIO SCIBELLI

Mailing Address 51 MOUNTAIN VIEW ST

City

SOUTH HADLEY

State

MA

Zip Code

01075-2133

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790157437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ALAN KULIG

Mailing Address 3 WILDWOOD LN

City

WILBRAHAM

State

MA

Zip Code

01095-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790158837825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

119.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ALLAN A CAMPBELL III

Mailing Address 75 OAKLAND ST

City
WILBRAHAM

State Zip Code
MA 01095-2766

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - ENTERPRISE ARCHITEC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790159037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ANDREW C DICKEY

Mailing Address 1183 LONGMEADOW ST

City
LONGMEADOW

State Zip Code
MA 01106-2201

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SVP & DEPUTY CHIEF INVESTMENT OFFICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790159337825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ANDREW C WILLIAMS

Mailing Address 53 SUNSET BEACH RD

City
BRANFORD

State Zip Code
CT 06405-5028

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790159637825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

317.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 118 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. BRENDA A SAVAGE

Mailing Address 1008 MAIN ST

City
SOMERS

State Zip Code
CT 06071-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP CLIENT RELATIONSHIP MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790165337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. BRIAN J PRAST

Mailing Address 47 ELLINGTON ST

City
LONGMEADOW

State Zip Code
MA 01106-1429

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790165937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. BRUCE C FRISBIE

Mailing Address 54 MASSASOIT AVE

City
W SPRINGFIELD

State Zip Code
MA 01089-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP TREASURY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790168337825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 119 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CAROL W DEMAS

Mailing Address 52 CEDAR WOODS GLN

City

W SPRINGFIELD

State

MA

Zip Code

01089-1637

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - FIELD TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790171337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. CAROL A DUBE

Mailing Address 8 PLAIN ST

City

EASTHAMPTON

State

MA

Zip Code

01027-2610

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - FINANCIAL REPORTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790171637825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. CHARLES G HIGGINS

Mailing Address 15 WOODLAND DELL RD

City

WILBRAHAM

State

MA

Zip Code

01095-1734

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SOURCING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790175237825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 120 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHRISTOPHER K KINNON

Mailing Address 2415 MANHATTAN AVE

City

HERMOSA BEACH

State

CA

Zip Code

90254-2542

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790183837825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CLIFFORD M NOREEN

Mailing Address 95 BENT TREE DR

City

E LONGMEADOW

State

MA

Zip Code

01028-1365

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790184137825

Amount of Each Receipt this Period

288.48

P/R Deduction (\$96.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. CRAIG WADDINGTON

Mailing Address 14 SPRING MEADOW DR

City

GRANBY

State

CT

Zip Code

06035-1327

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790184537825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

450.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 121 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DANIEL S HILL

Mailing Address 26 COLTON RD

City
GLASTONBURY

State Zip Code
CT 06033-3947

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790185637825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID J BROWN

Mailing Address 289 CHESTERFIELD RD

City
WESTHAMPTON

State Zip Code
MA 01027-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT-REAL ESTATE & FACILITII

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790187137825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID J ECHEVERRIA

Mailing Address 36 FARMINGTON AVE

City
LONGMEADOW

State Zip Code
MA 01106-1433

FEC ID number of contributing
federal political committee.

C

Name of Employer
BABSON CAPITAL MANAGEMENT LLC

Occupation
MANAGING DIR - INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790188637825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

138.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 122 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID D WHARMBY

Mailing Address 34 VERPLANK AVE

City
STAMFORD

State Zip Code
CT 06902-8216

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790192637825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DEREK D DARLEY

Mailing Address 27 NORTH ST

City
BLANDFORD

State Zip Code
MA 01008-9516

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP TREASURY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790197137825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID J REILLY

Mailing Address 32 JOSHUA DR

City
WEST SIMSBURY

State Zip Code
CT 06092-2124

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790206337825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 123 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DEAN R HINDMAN

Mailing Address 46 DWIGHT ST

City
BOSTON

State
MA

Zip Code
02118-3662

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790206637825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DONALD J PHELAN

Mailing Address 24 HAMMERSMITH

City
AVON

State
CT

Zip Code
06001-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790207837825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. EDWARD D YOUNELL

Mailing Address 15 KENSINGTON DR

City
WILBRAHAM

State
MA

Zip Code
01095-2800

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT-BROKERAGE/ALLIANCE S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790209537825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ELIZABETH CANAVAN

Mailing Address 5 HAVENHURST RD

City

WEST SPRINGFIELD

State

MA

Zip Code

01089-2160

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP STRATEGIC DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790211637825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. ELLEN RAWSON

Mailing Address 145 YOKUN RD

City

PITTSFIELD

State

MA

Zip Code

01201-8880

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790212237825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. EDWIN J PELIS

Mailing Address 29 MAIN ST

City

HATFIELD

State

MA

Zip Code

01038-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - AGENCY RECRUITING AND DEVELOPM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790215937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 125 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. GAIL S GARVEY

Mailing Address 23 CRESCENT CIR

City
WESTFIELD

State Zip Code
MA 01085-5003

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790220037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. GARY O STANKIEWICZ

Mailing Address 33 WISHING WELL WAY

City
W SPRINGFIELD

State Zip Code
MA 01089-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VP - APPLICATION OPERATIONS SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790222537825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. HARVEY BR HOFFMAN

Mailing Address 50 DEVONSHIRE TER

City
E LONGMEADOW

State Zip Code
MA 01028-3139

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
CORP VICE PRESIDENT - GENERAL RISK M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790231437825

Amount of Each Receipt this Period

288.48

P/R Deduction (\$96.16 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

340.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 126 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ISADORE JERMYN

Mailing Address 18 DUXBURY LN

City
LONGMEADOW

State Zip Code
MA 01106-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SENIOR VICE PRESIDENT & CHIEF ACTUAR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790232537825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES M LYNCH

Mailing Address 14 DEER RUN DR

City
COLCHESTER

State Zip Code
CT 06415-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - FINANCIAL ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790235337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES R WILLIAMS

Mailing Address 3938 DIANE RD

City
BIG PINE KEY

State Zip Code
FL 33043-6105

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP & ASSOC. GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790236837825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

282.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JEFFREY A COELHO

Mailing Address 15 MEADOWLARK CIR

City
LUDLOWState
MAZip Code
01056-1446FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790240937825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JEFFREY M SAJDAK

Mailing Address 56 VALLEY VIEW DR

City
LUDLOWState
MAZip Code
01056-3807FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - LIFE NEW BUSINESS & UNDERWRITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790241937825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. JENNIFER L LAKE

Mailing Address 24 NOTTINGHAM DR

City
E LONGMEADOWState
MAZip Code
01028-2630FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP - LEARNING & PERFORMANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790243137825

Amount of Each Receipt this Period

66.69

P/R Deduction (\$22.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

118.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 128 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. JOANNE M DENVER

Mailing Address 48 VAIL ST

City
SPRINGFIELD

State Zip Code
MA 01118-2161

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790244937825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JOHN E DEITELBAUM

Mailing Address 11 MIDDLE RD

City
ELLINGTON

State Zip Code
CT 06029-3615

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SVP & DEPUTY GEN COUNS USIG LAW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790248237825

Amount of Each Receipt this Period

403.86

P/R Deduction (\$134.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN R TAILLIE

Mailing Address 151 MCKENZIE DR

City
SOUTHINGTON

State Zip Code
CT 06489-4117

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790252037825

Amount of Each Receipt this Period

75.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

594.24

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JOSEPH A CALABRESE

Mailing Address 28 CANTERBURY LN

City

FEEDING HILLS

State

MA

Zip Code

01030-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790253237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES J NASCIMENTO

Mailing Address 432 LYON ST

City

LUDLOW

State

MA

Zip Code

01056-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790260237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JAMES P PUHALA III

Mailing Address 68 HOLCOMB ST

City

EAST GRANBY

State

CT

Zip Code

06026-9531

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790260437825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

242.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 130 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JAMES M RODOLAKIS

Mailing Address 26 EVERGREEN DR

City

E LONGMEADOW

State

MA

Zip Code

01028-1456

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790260537825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JEFFREY M GURSKI

Mailing Address 10 VICTORIA LN

City

WILBRAHAM

State

MA

Zip Code

01095-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790261237825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JEFFREY T ROBINSON

Mailing Address 28 DONAMOR LN

City

E LONGMEADOW

State

MA

Zip Code

01028-2220

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSMUTUAL INTERNATIONAL

Occupation

MANAGING DIRECTOR - MMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790261637825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

156.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 131 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KATHLEEN M COUGHLIN

Mailing Address 37 SOUTHWOOD RD

City
NEWINGTON

State Zip Code
CT 06111-3156

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP NEW BUSINESS UNDERWRITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790271437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. KATHY S REEVE

Mailing Address EDGEMERE HILLS BLDG 14
85 N MAIN ST UNIT 14A

City
EAST HAMPTON

State Zip Code
CT 06424-1448

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790272737825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. KEITH T SELL

Mailing Address 118 CHISWICK ST

City
LONGMEADOW

State Zip Code
MA 01106-2619

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790273037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KATHLEEN LYNCH

Mailing Address 136 MONTCLAIR DR

City

WEST HARTFORD

State

CT

Zip Code

06107-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790277637825

Amount of Each Receipt this Period

92.31

P/R Deduction (\$30.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. KENNETH M RICKSON

Mailing Address 7 CYPRESS LN

City

WILBRAHAM

State

MA

Zip Code

01095-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - SALES RISK MANAGEM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790278537825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. LAURA J PERLOTTO

Mailing Address 17 CLAIRE LANE

City

BLOOMFIELD

State

CT

Zip Code

06002-1181

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790280537825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

201.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 133 OF 247
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LINDA M FLYNN

Mailing Address 26 BAYNE ST

City

E LONGMEADOW

State

MA

Zip Code

01028-2214

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12				31			2014					

Transaction ID : PR790283837825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. LISA A HOWAT

Mailing Address 68 CHATHAM HILL RD

City

SOUTH GLASTONBURY

State

CT

Zip Code

06073-3542

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12				31			2014					

Transaction ID : PR790286637825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. LOUISE R LANGLOIS

Mailing Address 21 UPLAND RD

City

HOLYOKE

State

MA

Zip Code

01040-1422

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP QUANTITATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12				31			2014					

Transaction ID : PR790288337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

103.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 134 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MARK ACKERMAN

Mailing Address 385 GREEN HILL RD

City
LONGMEADOW

State Zip Code
MA 01106-2943

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790296037825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MATTHEW P NATCHARIAN

Mailing Address 3 RIDGEBURY RD

City
AVON

State Zip Code
CT 06001-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790301437825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL H GATELY

Mailing Address 134 FAIRVIEW TER

City
S GLASTONBURY

State Zip Code
CT 06073-3304

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790304937825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

311.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 135 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MITCHELL G TORFF

Mailing Address 114 GLYNN FARMS DR

City

E LONGMEADOW

State

MA

Zip Code

01028-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SYSTEMS CONSULTING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790308837825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL E DUBOIS

Mailing Address 76 CLEARBROOK DR

City

SPRINGFIELD

State

MA

Zip Code

01118-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SECOND VP & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790313337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL L KLOFAS

Mailing Address 64 WINDHAM DR

City

E LONGMEADOW

State

MA

Zip Code

01028-2668

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790314037825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 136 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL E ZAMMITTI

Mailing Address 57 VIRGINIA RAIL DR

City

MARLBOROUGH

State

CT

Zip Code

06447-1158

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790314737825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. NEIL E DRZEWIECKI

Mailing Address 29 POND LN

City

EAST GRANBY

State

CT

Zip Code

06026-9662

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790319637825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. PAMELA M BEALS

Mailing Address 20 WISHING WELL WAY

City

W SPRINGFIELD

State

MA

Zip Code

01089-4363

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & CHIEF LIFE UNDERWRIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790320437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PAMELA J DELANEY

Mailing Address 72 HILLCREST RD

City
WINDSOR

State Zip Code
CT 06095-3301

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - RISK & ANALYTICS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790320637825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. PHILLIP J PRESTON

Mailing Address 63 WRIGHT ST

City
AGAWAM

State Zip Code
MA 01001-3131

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP PROGRAM MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790330737825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PAUL GRIBBONS

Mailing Address 8 CRESTLAN DR

City
WORCESTER

State Zip Code
MA 01604-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - DI PRODUCT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790331837825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 138 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. PAUL T PROKO

Mailing Address 49 TIMBER LN

City
HOLDEN

State
MA

Zip Code
01520-1943

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - CLAIMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790332237825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. PETER G FERRIS

Mailing Address 393 PINEWOOD DR

City
LONGMEADOW

State
MA

Zip Code
01106-1643

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.78

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790332937825

Amount of Each Receipt this Period

34.59

P/R Deduction (\$11.53 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PETER C VANBEAVER

Mailing Address 8 VICTORIA LN

City
WILBRAHAM

State
MA

Zip Code
01095-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790333137825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 139 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROBERT CASALE

Mailing Address 30 THISTLE LN

City
BRISTOLState
CTZip Code
06010-8057FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP & CHIEF INFORMATION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790342237825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. RHAE A KENNEDY

Mailing Address 322 OLD FARM RD

City
SPRINGFIELDState
MAZip Code
01119-2825FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - INVESTMENT ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790351837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD P BARNHART

Mailing Address 344 WESTCHESTER RD

City
COLCHESTERState
CTZip Code
06415-2426FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP, ACCTG STANDARDS & IND RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790352037825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

773.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 140 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD D BOURGEOIS

Mailing Address 11 ECHO HILL RD

City
WILBRAHAM

State Zip Code
MA 01095-2663

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SENIOR VICE PRESIDENT - TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.70

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790352237825

Amount of Each Receipt this Period

230.85

P/R Deduction (\$76.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. RICHARD F BUCKLEY Jr.

Mailing Address 1 CEDAR RDG

City
SOUTH HADLEY

State Zip Code
MA 01075-1795

FEC ID number of contributing
federal political committee.

C

Name of Employer
BABSON CAPITAL MANAGEMENT LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790352337825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT J BRODERICK

Mailing Address 62 ACADEMY DR

City
LONGMEADOW

State Zip Code
MA 01106-2154

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790353137825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

392.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROBERT G LABUN

Mailing Address 84 WILDFLOWER CIR

City
WESTFIELD

State Zip Code
MA 01085-4590

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT, INVESTMENT ACCOUNTI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790354537825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT E MAHONEY

Mailing Address 44 LESLIE ST

City
WINDSOR LOCKS

State Zip Code
CT 06096-1117

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790354837825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT S ROSENTHAL

Mailing Address 12 SHERWOOD LN

City
AVON

State Zip Code
CT 06001-3215

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VP & ASSISTANT GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790355437825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

318.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROGER W CRANDALL

Mailing Address 165 CONVERSE ST APT 13

City

LONGMEADOW

State

MA

Zip Code

01106-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CHAIRMAN PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790355937825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. SUSAN A MOORE

Mailing Address 70 BROOKS RD

City

LONGMEADOW

State

MA

Zip Code

01106-2129

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790370137825

Amount of Each Receipt this Period

403.86

P/R Deduction (\$134.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. STEVEN P WALLACE

Mailing Address 145 S YORK ST UNIT 504

City

ELMHURST

State

IL

Zip Code

60126-3470

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790374337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

1026.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 143 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. STEVEN N LAVALLEY

Mailing Address 31 WEST ST

City
EASTHAMPTON

State Zip Code
MA 01027-1325

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP - MARKETING RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790374537825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. THOMAS H JURKOWSKI

Mailing Address 40 OLD SAWMILL RD

City
BELCHERTOWN

State Zip Code
MA 01007-9344

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - SALES & DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790378537825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. TIMOTHY C. FLANAGAN Jr.

Mailing Address 608 BELLE MEADE CT

City
WAXHAW

State Zip Code
NC 28173-7159

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation
GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790380337825

Amount of Each Receipt this Period

833.20

P/R Deduction (\$416.60 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

994.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 144 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. TIMOTHY J MORAN

Mailing Address 640 WESTFORD RD

City

ASHFORD

State

CT

Zip Code

06278-2416

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SERVICE MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790380637825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. VICTOR WOOLRIDGE

Mailing Address 146 LONGHILL ST

City

SPRINGFIELD

State

MA

Zip Code

01108-1438

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790387637825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY C. DOLLARHIDE

Mailing Address 9646 E LAUREL LN

City

SCOTTSDALE

State

AZ

Zip Code

85260-5956

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790394937825

Amount of Each Receipt this Period

1249.99

P/R Deduction (\$624.99 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1359.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 145 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. T RAY PHILLIPS

Mailing Address 6202 N SHERMAN DR

City

INDIANAPOLIS

State

IN

Zip Code

46220-4439

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790396737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. WILLIAM D. FRANKLIN

Mailing Address 5611 ENDERLY RD

City

BALTIMORE

State

MD

Zip Code

21212-2958

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.15

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790396837825

Amount of Each Receipt this Period

133.40

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KEN C. KOWALSKI

Mailing Address 3620 WILLOW LAWN DR

City

LYNCHBURG

State

VA

Zip Code

24503-3022

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790397437825

Amount of Each Receipt this Period

145.20

P/R Deduction (\$34.05 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

378.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 146 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WAYNE Y. TANAKA

Mailing Address 565 ALIHI PL

City
KAILUA

State
HI

Zip Code
96734-3914

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790398837825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. BRIAN W. MARTIN

Mailing Address 12217 CLEGHORN RD

City

COCKEYSVILLE

State

MD

Zip Code

21030-2218

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.11

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790404137825

Amount of Each Receipt this Period

235.32

P/R Deduction (\$58.83 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. HENRY A. ECHEVERRIA

Mailing Address 34 BOUVANT DR

City

PRINCETON

State

NJ

Zip Code

08540-1209

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790412037825

Amount of Each Receipt this Period

83.20

P/R Deduction (\$41.60 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

368.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 147 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRIAN W. O SULLIVAN

Mailing Address 130 SCHOOL ST

City

MARSHFIELD

State

MA

Zip Code

02050-2046

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.67

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790416137825

Amount of Each Receipt this Period

138.67

P/R Deduction (\$69.33 Monthly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHE E. COLLIER

Mailing Address 7162 REGIMENT DR

City

CINCINNATI

State

OH

Zip Code

45244-3617

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790419037825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BENJAMIN M. MUIRHEAD

Mailing Address 600 POST OAK RD

City

GORDON

State

TX

Zip Code

76453-3894

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790420737825

Amount of Each Receipt this Period

237.03

P/R Deduction (\$118.51 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

425.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 148 OF 247
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. STEPHEN G. DEBACKER

Mailing Address PO BOX 226

City

PREEMPTION

State

IL

Zip Code

61276-0226

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

862.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR790425337825

Amount of Each Receipt this Period

372.10

P/R Deduction (\$186.05 Monthly)

Full Name (Last, First, Middle Initial)

B. SCOTT M. SUNDET

Mailing Address 14316 CLEARVIEW LN

City

URBANDALE

State

IA

Zip Code

50323-2083

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR790425437825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DEAN S. CADY

Mailing Address 3554 JOSEPHINE LN

City

MASON

State

MI

Zip Code

48854-9568

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2014			

Transaction ID : PR790427537825

Amount of Each Receipt this Period

133.40

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

555.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 149 OF 247
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAUL J. MARIANO

Mailing Address PO BOX 554

City
SOUTHBURYState
CTZip Code
06488-0554FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR790438037825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. STEFAN E. GREENBERG

Mailing Address 27 BAILIWICK RD

City
GREENWICHState
CTZip Code
06831-3609FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR790448837825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROBERT J. SEGALL

Mailing Address 9 FAITH LN

City
ARDSLEYState
NYZip Code
10502-2510FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2014

Transaction ID : PR790450337825

Amount of Each Receipt this Period

500.00

P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRETT M. GARBUT

Mailing Address 33 FARMINGTON LN

City State Zip Code
 MELVILLE NY 11747-4016

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.40

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790451337825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEVEN R. SEROTTE

Mailing Address 1041 ERICA RD

City State Zip Code
 MILL VALLEY CA 94941-3748

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790451637825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. PETER J. LEBLANC

Mailing Address 150 CARONDELET PLZ

City State Zip Code
 SAINT LOUIS MO 63105-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790454337825

Amount of Each Receipt this Period

125.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 151 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. THOMAS S. MAPLES

Mailing Address 10918 UTICA AVE

City

LUBBOCK

State

TX

Zip Code

79424-7318

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790462637825

Amount of Each Receipt this Period

83.20

P/R Deduction (\$41.60 Monthly)

Full Name (Last, First, Middle Initial)

B. T J SHAUGHNESSY

Mailing Address 133 RIVERWALK WAY

City

MANCHESTER

State

NH

Zip Code

03101-2642

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790463037825

Amount of Each Receipt this Period

250.59

P/R Deduction (\$92.36 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JEFFREY W. KAMMERAAD

Mailing Address 2978 BROOKWIND DR

City

HOLLAND

State

MI

Zip Code

49424-1683

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790466537825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

383.79

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 152 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROBERT M. CORNETT

Mailing Address 115 STEELMAN RD

City

PURVIS

State

MS

Zip Code

39475-3325

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790467737825

Amount of Each Receipt this Period

166.67

P/R Deduction (\$33.34 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JERRY D. VESSELL

Mailing Address 911 CALLOWAY DR

City

BRENTWOOD

State

TN

Zip Code

37027-6539

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790470137825

Amount of Each Receipt this Period

185.59

P/R Deduction (\$45.45 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KENNETH T. PODELL

Mailing Address 425 REDLEAF RD

City

WYNNEWOOD

State

PA

Zip Code

19096-1623

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790483137825

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

432.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 153 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROBERT C. HERDLER

Mailing Address 222 W GLENDALE RD

City

WEBSTER GROVES

State

MO

Zip Code

63119-4019

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790508837825

Amount of Each Receipt this Period

51.73

P/R Deduction (\$12.84 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ROBERT K. MCGEE

Mailing Address 115 W LANIER DR

City

HARTSVILLE

State

SC

Zip Code

29550-3007

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.85

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790521037825

Amount of Each Receipt this Period

58.05

P/R Deduction (\$11.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ALBERTO GUTIERREZ

Mailing Address PO BOX 431621

City

MIAMI

State

FL

Zip Code

33243-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.78

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790522237825

Amount of Each Receipt this Period

188.61

P/R Deduction (\$48.98 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

298.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 154 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WALTER W. WOLAK

Mailing Address 525 ANGELO DR

City

BETHLEHEM

State

PA

Zip Code

18017-3735

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790525737825

Amount of Each Receipt this Period

381.65

P/R Deduction (\$190.82 Monthly)

Full Name (Last, First, Middle Initial)

B. ROBERT L. BELVEDERE

Mailing Address 74 WINDHAM RD

City

ROCKVILLE CENTRE

State

NY

Zip Code

11570-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1248.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790530237825

Amount of Each Receipt this Period

373.35

P/R Deduction (\$186.67 Monthly)

Full Name (Last, First, Middle Initial)

C. LAURA E. RILEY

Mailing Address 24 YORKE RD

City

MOUNTAIN LAKES

State

NJ

Zip Code

07046-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790530937825

Amount of Each Receipt this Period

69.30

P/R Deduction (\$13.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

824.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 155 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JASON H. JONES

Mailing Address 8555 VALEMONT DR

City
ATLANTA

State Zip Code
GA 30350-2850

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.38

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790541537825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES S VIOLA

Mailing Address 208 N FARMS RD

City
FLORENCE

State Zip Code
MA 01062-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790543937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THOMAS D. O GRADY

Mailing Address 11301 SILVERSTONE DR

City
MECHANICSVILLE

State Zip Code
VA 23116-5877

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790544237825

Amount of Each Receipt this Period

125.00

P/R Deduction (\$62.50 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

254.54

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 156 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS G DUDECK

Mailing Address 17 WINTERBERRY RD

City
DEEP RIVER

State Zip Code
CT 06417-2126

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.94

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790544537825

Amount of Each Receipt this Period

173.07

P/R Deduction (\$57.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JEFFREY R HUG

Mailing Address 4 WHITCOMB DR

City
SIMSBURY

State Zip Code
CT 06070-1119

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VP - EXECUTIVE BENEFITS RESEARCH/SUI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790545137825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JONATHAN R GRAY

Mailing Address 152 MORNINGSDR

City
LONGMEADOW

State Zip Code
MA 01106-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790545437825

Amount of Each Receipt this Period

76.47

P/R Deduction (\$25.49 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 157 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RAYMOND P MUISE

Mailing Address 2242 BAPTIST HILL RD

City
PALMER

State
MA

Zip Code
01069-9600

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SECURITY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790557837825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DONALD M TOWSE

Mailing Address 84 JANUARY HILL RD

City
AMHERST

State
MA

Zip Code
01002-9609

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CHANGE LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790568437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DEAN DULCHINOS

Mailing Address 20 ABBEY LN

City
E LONGMEADOW

State
MA

Zip Code
01028-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790568537825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 158 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID L MOOREFIELD

Mailing Address 3 MALDEN ST

City

WEST BOYLSTON

State

MA

Zip Code

01583-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790569137825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. KATHLEEN E BARRETT

Mailing Address 113 TAYLOR ST

City

GRANBY

State

MA

Zip Code

01033-9522

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP CHANGE LEADER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790571237825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PATRICK F OLEARCEK

Mailing Address 321 MUNGER HILL RD

City

WESTFIELD

State

MA

Zip Code

01085-4575

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP ADVANCED MARKETS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790573137825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

86.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KERRY HURLEY

Mailing Address 29 LYNNWOOD DR

City

LONGMEADOW

State

MA

Zip Code

01106-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790576337825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. KAREN W HART

Mailing Address 45 HAWTHORNE ST

City

LONGMEADOW

State

MA

Zip Code

01106-1938

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP CONTINUOUS IMPROVEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790577037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. KEVIN VI DEGRAY

Mailing Address 8 BROOK PASTURE LN

City

GRANBY

State

CT

Zip Code

06035-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP AGENCY FOCUS TEAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790577837825

Amount of Each Receipt this Period

133.35

P/R Deduction (\$44.45 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

191.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. KATHLEEN L KRAEZ

Mailing Address 111 ASHFORD RD

City
LONGMEADOW

State Zip Code
MA 01106-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790579437825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. ELIZABETH T SALVADOR

Mailing Address 77 SUSAN DR

City
LUDLOW

State Zip Code
MA 01056-3372

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP MASSMUTUAL WAY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790579537825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JOHN P QUIRK

Mailing Address 50 CHATHAM RD

City
LONGMEADOW

State Zip Code
MA 01106-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

KEY ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790581237825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 161 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD CARTIER

Mailing Address 34 OLD FARM RD

City
PALMER

State
MA

Zip Code
01069-2241

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP RELATIONSHIP MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790581937825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. DOUGLAS M TREVALLION II

Mailing Address 30 COVENTRY LN

City
AGAWAM

State
MA

Zip Code
01001-3569

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790590337825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ROGER M ROBERGE

Mailing Address 14 ROCKINGHAM CIR

City
EAST LONGMEADOW

State
MA

Zip Code
01028-3197

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790594537825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

259.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 162 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROBERT M SHETTLE

Mailing Address 65 KELSEY LN

City

GLASTONBURY

State

CT

Zip Code

06033-5040

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790597137825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. EDWARD G NEWTON

Mailing Address 67 RUMFORD ST

City

WEST HARTFORD

State

CT

Zip Code

06107-3754

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790600137825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. GEORGE F RATHBUN II

Mailing Address 127 TUNXIS ST

City

WINDSOR

State

CT

Zip Code

06095-1334

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - LIFE STRATEGIC SYSTE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790604437825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

132.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 163 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. JAMES O LACEY

Mailing Address 106 MAGNOLIA TER

City
SPRINGFIELD

State Zip Code
MA 01108-2533

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - PUBLIC RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790616237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CRAIG HAASE

Mailing Address 1 STONEHENGE DR

City
SIMSBURY

State Zip Code
CT 06070-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VP - RELATIONSHIP MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790623337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JEROME J SPELTZ

Mailing Address 12 ROCK LN

City
GUILFORD

State Zip Code
CT 06437-3531

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790626237825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 164 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GREG A. HARVEY

Mailing Address 15521 KESSLER ST

City

OVERLAND PARK

State

KS

Zip Code

66221-9333

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790632937825

Amount of Each Receipt this Period

250.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DAVID ROMANO

Mailing Address 128 RIMFIELD DR

City

SOUTH WINDSOR

State

CT

Zip Code

06074-1860

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790636737825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. SCOTT C WESTPHAL

Mailing Address 70 WELLS HILL RD

City

WESTON

State

CT

Zip Code

06883-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790637437825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

353.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 165 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS P SHEA

Mailing Address 81 GREENMEADOW DR

City
LONGMEADOW

State Zip Code
MA 01106-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790640637825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. STEFANO MARTINI

Mailing Address 18 CLAY CREEK DR

City
SUFFIELD

State Zip Code
CT 06078-1247

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - USIG SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790649237825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. BRUCE CLEARE

Mailing Address 207 CHESTNUT PLAIN RD

City
WHATELY

State Zip Code
MA 01093-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790649637825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

87.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 166 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. ROLAND P FAWTHROP

Mailing Address 51 HORSESHOE LN

City
SOMERS

State Zip Code
CT 06071-2235

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790658237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. RAKESH BHARDWAJ

Mailing Address 96 HORIZON LN

City
GLASTONBURY

State Zip Code
CT 06033-2828

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP - SALES SUPPORT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790661337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. JEFFREY A MORIN

Mailing Address 131 CANTERBURY CIR

City
E LONGMEADOW

State Zip Code
MA 01028-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
EXTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790661637825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MICHELE M WHITE

Mailing Address 40109 N CANDLEWYCK LN

City
PHOENIX

State Zip Code
AZ 85086-2903

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - POLICYHOLDER SERVIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790665637825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES B MOCKLER

Mailing Address 97 SCHOOL ST

City
NORTHFIELD

State Zip Code
MA 01360-9654

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CHANGE MANAGEMENT CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.05

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790671837825

Amount of Each Receipt this Period

52.95

P/R Deduction (\$17.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. TODD M GISH

Mailing Address 57 MIDDLE RD

City
ELLINGTON

State Zip Code
CT 06029-3615

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790677137825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

283.83

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SHEFALI DESAI

Mailing Address 24 MEADOWLARK DR

City State Zip Code
 E LONGMEADOW MA 01028-3172

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 MASSACHUSETTS MUTUAL LIFE INS. REGIONAL SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.16

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR790683137825

Amount of Each Receipt this Period

33.36

P/R Deduction (\$11.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN N. BYERS

Mailing Address 4680 MEDINA LAKE DR

City State Zip Code
 HAMEL MN 55340-4610

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR790684837825

Amount of Each Receipt this Period

250.00

P/R Deduction (\$62.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JASON M. TETHER

Mailing Address 1029 E FAIRVIEW LN

City State Zip Code
 ROCHESTER HILLS MI 48306-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 SELF INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR790687337825

Amount of Each Receipt this Period

138.75

P/R Deduction (\$34.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

422.11

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 169 OF 247

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DANIEL F. MCCARTHY

Mailing Address 22 CORTLAND DR

 City
 TOLLAND

 State
 CT

 Zip Code
 06084-2157

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR790691037825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID S. FEHRS

Mailing Address 191 BUCKTHORN DR

 City
 BADEN

 State
 PA

 Zip Code
 15005-2561

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR790708637825

Amount of Each Receipt this Period

416.76

P/R Deduction (\$204.17 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ALLEN W. CARR

Mailing Address 427 RHODA DR

 City
 LANCASTER

 State
 PA

 Zip Code
 17601-3669

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR790708837825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

516.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 170 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. EDWARD I. WIGHT

Mailing Address 804 KATESFORD RD

City
COCKEYSVILLE

State Zip Code
MD 21030-2246

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790710937825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. EDMOND H. JOHNSON

Mailing Address 617 DALE DR

City
VIRGINIA BCH

State Zip Code
VA 23452-1848

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790712737825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$30.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRIAN E. CODE

Mailing Address 10029 ORANGE GROVE DR

City
TAMPA

State Zip Code
FL 33618-4014

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790721037825

Amount of Each Receipt this Period

92.40

P/R Deduction (\$23.10 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

409.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 171 OF 247
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MICHAEL T. WAHL

Mailing Address 4 TODMORDEN LN

City
ROSE VALLEYState
PA Zip Code
19086-6729FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.35

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR790723337825

Amount of Each Receipt this Period

252.12

P/R Deduction (\$70.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PAUL R. GULLICKSON

Mailing Address 2535 FAIRWAY CT

City
BETTENDORFState
IA Zip Code
52722-6206FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR790728037825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. KENNETH C. THOMALLA

Mailing Address 122 FOREST EDGE CT

City
PALOS PARKState
IL Zip Code
60464-1948FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR790731137825

Amount of Each Receipt this Period

625.00

P/R Deduction (\$256.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

927.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 172 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LARRY W. FOSTER

Mailing Address 45 LAKE PT

City
DECATUR

State Zip Code
IL 62521-5500

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790731937825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JACK E. BLETSTEIN

Mailing Address 7546 GREENWAY LN

City
WEST BLOOMFIELD

State Zip Code
MI 48324-4796

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790734137825

Amount of Each Receipt this Period

199.95

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DONOVAN D. PFAFF

Mailing Address 1101 RED TAIL DR

City
VERONA

State Zip Code
WI 53593-7961

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790735737825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

299.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 173 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOHN C. PRATHER

Mailing Address 87 CHERRY RD

City
MEMPHIS

State Zip Code
TN 38117-3101

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790749637825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

B. LILBURN H. OWENS

Mailing Address 734 HIGHLAND CIR

City
TUPELO

State Zip Code
MS 38804-2006

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790766337825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. SYLENA G ECHEVARRIA

Mailing Address 166 WOODBROOK TER

City
WEST SPRINGFIELD

State Zip Code
MA 01089-4444

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP POLICYHOLDER SVC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790779937825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

324.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. VIRGINIA C CUMMINGS

Mailing Address 409 TRAFTON RD

City
SPRINGFIELD

State Zip Code
MA 01108-2647

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
GOVERNMENT RELATIONS CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790783837825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. VANESSA B MORIN

Mailing Address 131 CANTERBURY CIR

City
E LONGMEADOW

State Zip Code
MA 01028-5710

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP STRATEGIC DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.24

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790790337825

Amount of Each Receipt this Period

92.31

P/R Deduction (\$30.77 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. GRETA A ZIELINSKI

Mailing Address 894 BERNIE AVE

City
W SPRINGFIELD

State Zip Code
MA 01089-4415

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
TAX DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790804637825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

161.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 175 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MOISES X AFONSO

Mailing Address 82 RESERVOIR RD

City
LUDLOWState
MAZip Code
01056-1693FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790806037825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM F DOUGHERTY

Mailing Address 255 BOARDMAN LN

City

MIDDLETOWN

State

CT

Zip Code

06457-7533

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP MASSMUTUAL WAY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790807937825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PATRICK H NADEAU

Mailing Address 311 ANDREWS RD

City

WOLCOTT

State

CT

Zip Code

06716-1048

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - ARCHITECTURE AND TECHNOLOGY PI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790808137825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

80.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 176 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DONALD G CARTEN

Mailing Address 654 MOUNTAIN RD

City

CHESHIRE

State

CT

Zip Code

06410-3306

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - IT SERVICE MANAGEME

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790808237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. NORMAN A SMITH

Mailing Address 32 LAUREL ST

City

LONGMEADOW

State

MA

Zip Code

01106-1124

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR VICE PRESIDENT - USIG FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1499.94

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790808637825

Amount of Each Receipt this Period

173.07

P/R Deduction (\$57.69 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID S ALLEN

Mailing Address 8 WINHALL LN

City

HARTFORD

State

CT

Zip Code

06105-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP-DEP GEN COUN DISP RES & CORP TA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790809737825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

426.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RICHARD Q KELLY

Mailing Address 203 TAYLOR RD

City

COLCHESTER

State

CT

Zip Code

06415-1778

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SOURCING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790811637825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. SCOTT PICCONE

Mailing Address 33 TROTWOOD DR

City

WEST HARTFORD

State

CT

Zip Code

06117-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790815837825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. STEPHEN J. KENDE

Mailing Address 41 HAMILTON ST

City

PLATTSBURGH

State

NY

Zip Code

12901-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR790846737825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

130.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 178 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LISNARDO DE CASTRO

Mailing Address 1441 CAPRI LN APT 5801

City
WESTON

State Zip Code
FL 33326-4015

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790868937825

Amount of Each Receipt this Period

125.88

P/R Deduction (\$15.14 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. DAVID A. BRACKENBURY

Mailing Address 3236 GREEN MEADOW DR

City
BETHLEHEM

State Zip Code
PA 18017-1943

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790933837825

Amount of Each Receipt this Period

288.85

P/R Deduction (\$144.42 Monthly)

Full Name (Last, First, Middle Initial)

C. STEPHEN G. KROCHMAL

Mailing Address 936 DANA HIGHLANDS CT

City
LAFAYETTE

State Zip Code
CA 94549-1737

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR790946637825

Amount of Each Receipt this Period

58.83

P/R Deduction (\$14.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

473.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 179 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARVIN G. HICKS

Mailing Address 316 WINSTON SALEM AVE

City

VIRGINIA BCH

State

VA

Zip Code

23451-3631

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790960937825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Monthly)

Full Name (Last, First, Middle Initial)

B. GARY B. WOOLMAN

Mailing Address 10523 INDIAN RIDGE DR

City

FORT WAYNE

State

IN

Zip Code

46814-9090

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR790998637825

Amount of Each Receipt this Period

133.25

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. AMY R. RYDER

Mailing Address 3260 COX RD

City

LOUISVILLE

State

TN

Zip Code

37777-3700

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791040037825

Amount of Each Receipt this Period

67.21

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

350.46

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 180 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARY J. SCHROEDER

Mailing Address 1518 OLIVE LN

City

LA CANADA FLT

State

CA

Zip Code

91011-2105

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791115937825

Amount of Each Receipt this Period

333.32

P/R Deduction (\$66.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. BERNADETTE CLEGG

Mailing Address 205 RESERVOIR AVE

City

REHOBOTH

State

MA

Zip Code

02769-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791144137825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DAVID L NAGLE

Mailing Address 7 HIGH MEADOW CIR

City

E LONGMEADOW

State

MA

Zip Code

01028-3171

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791148437825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

408.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SUSAN M CASINEAU

Mailing Address 3 FERNWOOD DR

City
WILBRAHAM

State
MA

Zip Code
01095-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP PROJECT MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791152537825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. JAMES J O'SHAUGHNESSY

Mailing Address 591 MAIN ST

City
CONCORD

State
MA

Zip Code
01742-3303

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791165937825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MATTISON A. DILTS

Mailing Address 8025 LAKE SHORE DR

City
GARY

State
IN

Zip Code
46403-1339

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.01

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791177437825

Amount of Each Receipt this Period

155.56

P/R Deduction (\$38.89 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

242.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 182 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. TODD P. GULLICKSON

Mailing Address 1906 E 60TH CIR

City
DAVENPORT

State Zip Code
IA 52807-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791177837825

Amount of Each Receipt this Period

60.00

P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. THOMAS E. SHAUGHNESSY

Mailing Address 355 LINDSTROM LN

City
MANCHESTER

State Zip Code
NH 03104-4795

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.01

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791185137825

Amount of Each Receipt this Period

444.41

P/R Deduction (\$211.12 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MATTHEW W. BENSON

Mailing Address 368 LAKEMONT CIR

City
FRANKLIN

State Zip Code
TN 37067-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791188537825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

604.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. STEPHEN K. COLLINS

Mailing Address 236 STANFORD DR

City

SAN ANTONIO

State

TX

Zip Code

78212-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791191537825

Amount of Each Receipt this Period

750.00

P/R Deduction (\$375.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. DOUGLAS W TAYLOR

Mailing Address 12 ERSKINE DR

City

LONGMEADOW

State

MA

Zip Code

01106-1614

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791193737825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ROBERT C WATERMAN

Mailing Address 5 DRURY LN

City

LONGMEADOW

State

MA

Zip Code

01106-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791195537825

Amount of Each Receipt this Period

53.34

P/R Deduction (\$17.78 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

884.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 184 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DAVID HARDY

Mailing Address 12146 GLEN GARY CIR

City

RICHMOND

State

VA

Zip Code

23233-1668

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP AGENCY FOCUS TEAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791199937825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT FEINGOLD

Mailing Address 29 WINTERSET LN

City

SIMSBURY

State

CT

Zip Code

06070-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791201037825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. ANDREW M GOLDBERG

Mailing Address 172 CAPTAIN RD

City

LONGMEADOW

State

MA

Zip Code

01106-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791207037825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 185 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MELISSA MILLAN

Mailing Address 31 SEMINARY RD

City

SIMSBURY

State

CT

Zip Code

06070-2010

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP WORKSITE INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3230.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791207737825

Amount of Each Receipt this Period

134.62

P/R Deduction (\$134.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. ADAM GOETZ

Mailing Address 604 QUINCY LN

City

WEXFORD

State

PA

Zip Code

15090-6836

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791213137825

Amount of Each Receipt this Period

138.75

P/R Deduction (\$34.75 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DARREN J. WRIGHT

Mailing Address 6020 E CALLE DEL MEDIA

City

SCOTTSDALE

State

AZ

Zip Code

85251-3018

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.67

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791221237825

Amount of Each Receipt this Period

208.27

P/R Deduction (\$41.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

481.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. GRETCHEN G. VOXLAND

Mailing Address 353 HANAMAU ST STE 2

City
KAHULUI

State
HI

Zip Code
96732-2474

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791228537825

Amount of Each Receipt this Period

133.25

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL J STCLAIR

Mailing Address 27 E RED BRIDGE LN

City

SOUTH HADLEY

State

MA

Zip Code

01075-2287

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - SALES & DISTRIBUTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791235437825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. DEBRA L ANDERSON

Mailing Address 46 GLENDALE RD

City

HAMPDEN

State

MA

Zip Code

01036-9121

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSMUTUAL TRUST COMPANY

Occupation

VICE PRESIDENT - TRUST OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791239037825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

329.60

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 187 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JULIA L. BIRD

Mailing Address 2273 E CONTINENTAL BLVD

City
SOUTHLAKE

State
TX

Zip Code
76092-9796

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791255837825

Amount of Each Receipt this Period

125.00

P/R Deduction (\$25.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. PAUL BACON

Mailing Address 11 RAVINE CIR

City
WESTFIELD

State
MA

Zip Code
01085-5005

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & CHIEF UNDERWRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791276837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. TERRENCE MILKA

Mailing Address 10 WOODS LN

City
SIMSBURY

State
CT

Zip Code
06070-2441

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSMUTUAL TRUST COMPANY

Occupation

SECOND VP TRUST COMPANY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791279337825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

286.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 188 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHRISTOPHER P DOWD

Mailing Address 35 SUNSET TER

City

WEST HARTFORD

State

CT

Zip Code

06107-2737

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791281137825

Amount of Each Receipt this Period

57.69

P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GREG P. WOOD

Mailing Address 1249 E 26TH ST

City

TULSA

State

OK

Zip Code

74114-2603

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791295737825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. DEBBIE L COTE

Mailing Address 158 BARTON AVE

City

BELCHERTOWN

State

MA

Zip Code

01007-9459

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - WORKSITE POST-SALES OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791301237825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

282.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 189 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. PAULA M TREMBLAY

Mailing Address 158 PINE HILL RD

City
TOLLAND

State Zip Code
CT 06084-3726

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP PUBLIC RELATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791303137825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. PATRICK COYNE

Mailing Address 20 S RIDGE RD

City
HAMPDEN

State Zip Code
MA 01036-9805

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
SECOND VP - ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791303537825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. HEATHER MACLEAN

Mailing Address 10 FERRY ST

City
SOUTH HADLEY

State Zip Code
MA 01075-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791308137825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 190 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KEVIN LACOMB

Mailing Address 39 CHRISTIAN HILL RD

City

HIGGANUM

State

CT

Zip Code

06441-4031

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP, TAX PLANNING AND STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791326637825

Amount of Each Receipt this Period

83.34

P/R Deduction (\$27.78 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. NICOLE EI MARKS

Mailing Address 40 CIDER MILL HTS

City

NORTH GRANBY

State

CT

Zip Code

06060-1430

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP TRAINING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.40

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791327137825

Amount of Each Receipt this Period

46.20

P/R Deduction (\$15.40 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. CHRISTINA A CASIELLO

Mailing Address 63 HILLSIDE DR

City

E LONGMEADOW

State

MA

Zip Code

01028-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CLAIM DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791327337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

158.37

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 191 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. SUSAN E SCHECHTER

Mailing Address 60 LEDGEWOOD RD

City

WEST HARTFORD

State

CT

Zip Code

06107-3731

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP & ASSISTANT GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791332837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. AUDREY MEYERLAMPERT

Mailing Address 120 LOOMIS ST

City

NORTH GRANBY

State

CT

Zip Code

06060-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791334837825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. GEOFFREY R. LESTER

Mailing Address 10604 CLOISTER DR

City

RICHMOND

State

VA

Zip Code

23238-3454

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791342537825

Amount of Each Receipt this Period

61.38

P/R Deduction (\$14.77 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 192 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ELIZABETH W CHICARES

Mailing Address 186 BELLE WOODS DR

City

GLASTONBURY

State

CT

Zip Code

06033-1667

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP & CHIEF ENTERPRISE RISK OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2474.64

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791351737825

Amount of Each Receipt this Period

262.96

P/R Deduction (\$96.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. PAUL F RANNENBERG

Mailing Address 53 JANELLE DR

City

AGAWAM

State

MA

Zip Code

01001-2735

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791362837825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. CHRISTOPHER DEFRANCIS

Mailing Address 41 MAYNARD RD

City

NORTHAMPTON

State

MA

Zip Code

01060-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791365037825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

389.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 193 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL T ROLLINGS

Mailing Address 5 DURHAM RD

City

LONGMEADOW

State

MA

Zip Code

01106-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP & CHIEF FINANCIAL OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791365837825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MATTHEW D. HUTCHESON

Mailing Address 903 WILSON BLVD

City

NASHVILLE

State

TN

Zip Code

37215-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791374737825

Amount of Each Receipt this Period

250.00

P/R Deduction (\$125.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. FRANCINE L REIPOLD

Mailing Address 23 PINE KNL

City

SOUTHWICK

State

MA

Zip Code

01077-9342

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

CORPORATE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791383037825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

856.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CHRISTINE M GENDRON

Mailing Address 70 MURIEL LN

City

FEEDING HILLS

State

MA

Zip Code

01030-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SYSTEMS ANALYSIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791388937825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RYAN M. HILL

Mailing Address 1426 AUTUMNMIST DR

City

ALLEN

State

TX

Zip Code

75002-4956

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.38

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791411637825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. HOLLY B. CARROCCIO

Mailing Address 1928 SANDPIPER LN

City

PLANO

State

TX

Zip Code

75075-8500

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791411737825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

212.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 195 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DANIEL G. ROETHER

Mailing Address 7015 N 23RD PL

City
PHOENIX

State Zip Code
AZ 85020-5615

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.32

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791435137825

Amount of Each Receipt this Period

179.66

P/R Deduction (\$89.83 Monthly)

Full Name (Last, First, Middle Initial)

B. RICHARD W. ROMAN

Mailing Address 594 FAIRWAY DR

City
NOVATO

State Zip Code
CA 94949-5837

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791435237825

Amount of Each Receipt this Period

92.10

P/R Deduction (\$23.10 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. SUSAN BEAUDIN

Mailing Address 9 OLD POOR FARM RD

City
WARE

State Zip Code
MA 01082-9780

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP BUSINESS OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791510437825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 196 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. RUSSELL D MORRISON

Mailing Address 826 E KINGSTON AVE

City
CHARLOTTE

State Zip Code
NC 28203-5124

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR79151137825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. CHIN-JUNG V YANG

Mailing Address 18524 ROLLINGDALE LN

City
DAVIDSON

State Zip Code
NC 28036-7862

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791511537825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. THOMAS M FINKE

Mailing Address 4920 HARDISON RD

City
CHARLOTTE

State Zip Code
NC 28226-6418

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4999.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791511937825

Amount of Each Receipt this Period

576.90

P/R Deduction (\$192.30 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

773.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. WILLIAM COOK

Mailing Address 71 BLUE HILLS RD

City
AMHERST

State Zip Code
MA 01002-2219

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
AVP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.02

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791515137825

Amount of Each Receipt this Period

83.34

P/R Deduction (\$27.78 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. JOHN S. DAMERON

Mailing Address 6559 CROSS FIELD LN

City
CHARLOTTE

State Zip Code
NC 28226-7582

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791531137825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. KAREN WATERMAN

Mailing Address 5 DRURY LN

City
LONGMEADOW

State Zip Code
MA 01106-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
STRATEGIC CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791541037825

Amount of Each Receipt this Period

34.65

P/R Deduction (\$11.55 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. GARY MURTAGH

Mailing Address 5609 LANDS END CT

City
WILMINGTON

State Zip Code
NC 28409-2377

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791542637825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. NICHOLAS FYNTRILAKIS

Mailing Address 5 RIDGE RD

City
HAMPDEN

State Zip Code
MA 01036-9518

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - COMMUNITY RESPONSI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791550237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. JO-ANNE RANKIN

Mailing Address 39 AUTUMN DR

City
TOLLAND

State Zip Code
CT 06084-3817

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791550937825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MARIE T POLITIS

Mailing Address 9 WYNCAIRN

City

EAST GRANBY

State

CT

Zip Code

06026-9642

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791551337825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. CHERIE A COSTA

Mailing Address 467 SOUTHWEST ST

City

FEEDING HILLS

State

MA

Zip Code

01030-1057

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

MARKETING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791589037825

Amount of Each Receipt this Period

34.65

P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. RICHARD GOLDSTEIN

Mailing Address 197 LYNNWOOD DR

City

LONGMEADOW

State

MA

Zip Code

01106-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - BENEFITS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791591637825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 200 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. EMILY PORISS

Mailing Address 50 KENMORE RD

City

BLOOMFIELD

State

CT

Zip Code

06002-2135

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SECOND VP & ASSOC. GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791591837825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. PAUL A. BAVARO

Mailing Address 6022 LAS COLINAS CIR

City

LAKE WORTH

State

FL

Zip Code

33463-6560

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791594037825

Amount of Each Receipt this Period

250.00

P/R Deduction (\$125.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CAMILLE DONALD

Mailing Address 621 MCKENZIE AVE UNIT 101

City

ALEXANDRIA

State

VA

Zip Code

22301-1189

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791608137825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

353.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 201 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DENNIS MILES

Mailing Address 25 TIMBER RIDGE RD

City

W SPRINGFIELD

State

MA

Zip Code

01089-1654

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT - RS PRODUCT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791623337825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. LAWRENCE BOUDREAU

Mailing Address 39 RIVERVIEW DR

City

SUFFIELD

State

CT

Zip Code

06078-1419

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

ASSISTANT VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791623437825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. GWENDOLYN FERRARI

Mailing Address 1511 CANYON RIDGE DR

City

BROAD BROOK

State

CT

Zip Code

06016-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791776437825

Amount of Each Receipt this Period

28.83

P/R Deduction (\$9.61 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MARY S BLOCK

Mailing Address 67 PERSHING RD

City

WINDSOR LOCKS

State

CT

Zip Code

06096-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & SENIOR COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791784437825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT ERWIN

Mailing Address 185 COVENTRY LN

City

LONGMEADOW

State

MA

Zip Code

01106-1629

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791800237825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM SILVANIC

Mailing Address 120 CREAMERY HILL RD

City

GRANBY

State

CT

Zip Code

06035-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP WORKSITE INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791800437825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

311.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. ANNEMARIE NASUTA

Mailing Address 26 LAST LEAF CIR

City
WINDSOR

State Zip Code
CT 06095-4733

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSMUTUAL TRUST COMPANY

Occupation
RELATIONSHIP MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791801837825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SHANE TENNY

Mailing Address 8317 PRINCE GEORGE RD

City
CHARLOTTE

State Zip Code
NC 28210-4229

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.05

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791822937825

Amount of Each Receipt this Period

151.05

P/R Deduction (\$75.52 Monthly)

Full Name (Last, First, Middle Initial)

C. CHARLES V. COLLINS

Mailing Address 4193 OBAR DR

City
CHATTANOOGA

State Zip Code
TN 37419-2180

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791823337825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

308.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 204 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DALE T. HOLEC

Mailing Address 2590 W RIDGE RD

City
GLADWIN

State Zip Code
MI 48624-9701

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791825137825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. STEVEN A. MILLER

Mailing Address 10797 EAGLE CREST LN

City
PARKER

State Zip Code
CO 80138-3070

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.66

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791864237825

Amount of Each Receipt this Period

137.64

P/R Deduction (\$19.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. SHANNON GAMACHE

Mailing Address 57 LAUREL LN

City
COLUMBIA

State Zip Code
CT 06237-1013

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP & COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791870737825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

216.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 205 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JONGSIK KIM

Mailing Address 4536 WILSHIRE BLVD

City

LOS ANGELES

State

CA

Zip Code

90010-3836

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791881837825

Amount of Each Receipt this Period

72.64

P/R Deduction (\$14.60 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SHAWN R. KEANE

Mailing Address 256 7TH AVE

City

SWARTHMORE

State

PA

Zip Code

19081-2635

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791888537825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. PAMELA MCKOIN

Mailing Address 160 GUINEA RD

City

STAMFORD

State

CT

Zip Code

06903-3718

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

ASSISTANT VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR791901437825

Amount of Each Receipt this Period

15.00

P/R Deduction (\$5.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

187.64

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 206 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. DIANE LOPES

Mailing Address 11 LITTLE SORREL LN

City
SOMERS

State
CT

Zip Code
06071-2030

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - CONTINUOUS IMPROVEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.70

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791902637825

Amount of Each Receipt this Period

80.85

P/R Deduction (\$26.95 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. THOMAS OSWALD

Mailing Address 665 CENTER ST UNIT 713

City
LUDLOW

State
MA

Zip Code
01056-1534

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SECOND VP - TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.96

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791903237825

Amount of Each Receipt this Period

115.38

P/R Deduction (\$38.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ERIC S. ABOWD

Mailing Address 1525 STAR WAY

City
RENO

State
NV

Zip Code
89511-8691

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791913737825

Amount of Each Receipt this Period

208.27

P/R Deduction (\$41.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

404.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 247

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. LINDA L. WALLACE

Mailing Address 290 CORONA AVE

City

LONG BEACH

State

CA

Zip Code

90803-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR791914537825

Amount of Each Receipt this Period

131.15

P/R Deduction (\$65.57 Monthly)

Full Name (Last, First, Middle Initial)

B. FRANK F. BOWLING

Mailing Address 1013 DURHAM DR

City

GALLATIN

State

TN

Zip Code

37066-3411

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR791932937825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. THOMAS H. KYLE

Mailing Address 1404 PARK PL

City

SHERMAN

State

TX

Zip Code

75092-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR791934037825

Amount of Each Receipt this Period

84.08

P/R Deduction (\$19.32 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

265.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 208 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. DOUGLAS ENDORF

Mailing Address 27 STRAWBERRY FIELDS

City State Zip Code
 GRANBY CT 06035-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MASSACHUSETTS MUTUAL LIFE INS.

Occupation
 VICE PRESIDENT & ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR791938637825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM F MONROEJR

Mailing Address 225 GENERAL HOBBS RD

City State Zip Code
 JEFFERSON MA 01522-1565

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MASSACHUSETTS MUTUAL LIFE INS.

Occupation
 VICE PRESIDENT - MMLISI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.22

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR791969137825

Amount of Each Receipt this Period

115.41

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM JORDAN

Mailing Address 25 HARVEST HILL RD

City State Zip Code
 WEST SIMSBURY CT 06092-2224

FEC ID number of contributing
federal political committee.

C

Name of Employer
 CORNERSTONE RE ADVISERS LLC

Occupation
 VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR791969337825

Amount of Each Receipt this Period

30.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 209 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. MAUREEN MORRIS

Mailing Address 10 WOODLAND PL

City
LUDLOW

State
MA

Zip Code
01056-1680

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP TREASURY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791969437825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. FRANCES THOMAS

Mailing Address 1109 ROXBORO DR NE

City
ATLANTA

State
GA

Zip Code
30324-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.90

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791972237825

Amount of Each Receipt this Period

28.95

P/R Deduction (\$9.65 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ROMAN A. MATUSZ

Mailing Address 507 SEQUOIA DR

City
PITTSBURGH

State
PA

Zip Code
15236-4460

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR791985137825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

126.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. RYAN L. DONAGHY

Mailing Address 2205 CHESTERFIELD AVE

City
CHARLOTTEState Zip Code
NC 28205-6015FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR791987637825

Amount of Each Receipt this Period

83.20

P/R Deduction (\$41.60 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. IAN HAWKINS

Mailing Address 36 PRESCOTT AVE

City
GLEN RIDGEState Zip Code
NJ 07028-1918FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIR - RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792000737825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. DOMINIC GREW

Mailing Address 44 HARDING ST

City
SHARONState Zip Code
MA 02067-2515FEC ID number of contributing
federal political committee.

C

Name of Employer

BABSON CAPITAL MANAGEMENT LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792002837825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

187.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 211 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRANKLIN D. BUTLER

Mailing Address 10290 SHAWNS GROVE PL

City State Zip Code
 MECHANICSVILLE VA 23116-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR792022037825

Amount of Each Receipt this Period

133.32

P/R Deduction (\$26.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. ANTHONY PIERSON

Mailing Address 22 ARNOLDALE RD

City State Zip Code
 WEST HARTFORD CT 06119-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE RE ADVISERS LLC

Occupation

MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR792042037825

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JANINE M. BOUCHARD

Mailing Address 34 L ST

City State Zip Code
 HULL MA 02045-1706

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 31 / 2014

Transaction ID : PR792053337825

Amount of Each Receipt this Period

93.75

P/R Deduction (\$18.75 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

267.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 212 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. COLIN W. KIMPEL

Mailing Address 6201 WALHONDING RD

City

BETHESDA

State

MD

Zip Code

20816-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792055837825

Amount of Each Receipt this Period

184.65

P/R Deduction (\$46.15 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. KEVIN B WATERMAN

Mailing Address 110 JOSEPH LN

City

SOUTH WINDSOR

State

CT

Zip Code

06074-1464

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT & ACTUARY - HLTH PROC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.88

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792064137825

Amount of Each Receipt this Period

46.14

P/R Deduction (\$15.38 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JONATHAN HARTMAN

Mailing Address 14806 MCCORMICK ST

City

SHERMAN OAKS

State

CA

Zip Code

91411-4032

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.09

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792074837825

Amount of Each Receipt this Period

188.41

P/R Deduction (\$94.21 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

419.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 213 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ASHISH M. CHOWDHRY

Mailing Address 20 NEWPORT PKWY

City

JERSEY CITY

State

NJ

Zip Code

07310-2300

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.93

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792081837825

Amount of Each Receipt this Period

49.31

P/R Deduction (\$12.27 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GEORGE A. SNOOK

Mailing Address 502 SARAH CT

City

MECHANICSBURG

State

PA

Zip Code

17050-7231

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.47

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792083337825

Amount of Each Receipt this Period

207.47

P/R Deduction (\$103.73 Monthly)

Full Name (Last, First, Middle Initial)

C. WENDY L. SPINNER

Mailing Address 306 CHURCH ST

City

BOUND BROOK

State

NJ

Zip Code

08805-1936

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792083537825

Amount of Each Receipt this Period

134.93

P/R Deduction (\$25.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

391.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 214 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SEAN RHO

Mailing Address 1717 N VERDUGO RD

City
GLENDALE

State Zip Code
CA 91208-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792090437825

Amount of Each Receipt this Period

149.11

P/R Deduction (\$33.35 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MACARTHUR STARKS

Mailing Address 59 WRENWOOD ST

City
SPRINGFIELD

State Zip Code
MA 01119-2213

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792096537825

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JONATHAN D. LAU

Mailing Address 824 BENNAVILLE AVE

City
BIRMINGHAM

State Zip Code
MI 48009-3665

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792101337825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

286.61

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MICHAEL DOMINGUE

Mailing Address 107 SHELBURNE CIR

City
LAFAYETTEState Zip Code
LA 70508-6440FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR792102837825

Amount of Each Receipt this Period

72.70

P/R Deduction (\$17.05 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL DUNN

Mailing Address 365 N MAIN ST

City
SUFFIELDState Zip Code
CT 06078-1828FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP INSTITUTIONAL INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR792107037825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL O'CONNOR

Mailing Address 41 BELLECLAIRE AVE

City
LONGMEADOWState Zip Code
MA 01106-1415FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SENIOR MANAGING DIRECTOR - MMI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.10

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR792107737825

Amount of Each Receipt this Period

788.55

P/R Deduction (\$262.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

884.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. LENORE T MACWADE

Mailing Address 20 MOUNTAIN HILL RD

City

N GROSVENORDL

State

CT

Zip Code

06255-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSMUTUAL INTERNATIONAL

Occupation

CHANGE AGENT CONSULTANT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR792119037825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MICHAEL J. LEVIN

Mailing Address 3218 W PALMIRA AVE

City

TAMPA

State

FL

Zip Code

33629-7136

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR792121037825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DOLFORD LAYSON

Mailing Address 1734 WATER SPRINGS WAY

City

DACULA

State

GA

Zip Code

30019-7626

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2014

Transaction ID : PR792124337825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

134.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. THOMAS ALLARD

Mailing Address 44 WOODLAWN ST

City

SOUTH HADLEY

State

MA

Zip Code

01075-2242

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

FIELD CLAIM CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792128337825

Amount of Each Receipt this Period

37.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. ELLEN S CONLIN

Mailing Address 20 WELLESLEY DR

City

LONGMEADOW

State

MA

Zip Code

01106-2833

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP & ASSISTANT GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.92

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792129537825

Amount of Each Receipt this Period

80.76

P/R Deduction (\$26.92 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. CHRISTOPHER BROWN

Mailing Address 32 MORRIS ST

City

CHICOPEE

State

MA

Zip Code

01020-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

OPERATIONS SUPPORT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792130337825

Amount of Each Receipt this Period

23.10

P/R Deduction (\$7.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 247
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BRIAN M. ROBERTS

Mailing Address 54 COALTER RIDGE CT

City State Zip Code
DARDENNE PR MO 63368-7587

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792139237825

Amount of Each Receipt this Period

66.60

P/R Deduction (\$16.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. JAE JUNKUNC

Mailing Address 221 TRUMBULL STREET APT 502

City State Zip Code
HARTFORD CT 06103-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - DIST & STRAT PLNNG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792144337825

Amount of Each Receipt this Period

173.10

P/R Deduction (\$57.70 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MICHAEL S. KIPNISS

Mailing Address 115 WHITE COLUMNS DR

City State Zip Code
ALPHARETTA GA 30004-3057

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.15

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR792446837825

Amount of Each Receipt this Period

133.40

P/R Deduction (\$33.35 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

373.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 219 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. JOHN J. MILLER

Mailing Address 13 WHIPPANY AVE

City
WARREN

State
NJ

Zip Code
07059-5774

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.98

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792501437825

Amount of Each Receipt this Period

166.64

P/R Deduction (\$41.66 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. RUSSELL J. ROLNICK

Mailing Address 8 TALL PINES CT

City
WEST NYACK

State
NY

Zip Code
10994-1341

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792728137825

Amount of Each Receipt this Period

103.87

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. BRIAN C. LARGE

Mailing Address 141 WOLFPIT AVE

City
NORWALK

State
CT

Zip Code
06851-3429

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR792732637825

Amount of Each Receipt this Period

125.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

395.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 220 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. PAUL E. KARLITZ

Mailing Address 2717 VIA ELEVADO

City State Zip Code
 PALOS VERDES ESTATES CA 90274-1436

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.35

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR792971837825

Amount of Each Receipt this Period

233.35

P/R Deduction (\$116.67 Monthly)

Full Name (Last, First, Middle Initial)

B. DAVID S. KATES

Mailing Address 88 MIDDLE RD

City State Zip Code
 SANDS POINT NY 11050-2634

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR793060537825

Amount of Each Receipt this Period

62.50

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ERIK C. SUSSMAN

Mailing Address 7283 NW 116TH LN

City State Zip Code
 PARKLAND FL 33076-4262

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2014

Transaction ID : PR793184337825

Amount of Each Receipt this Period

381.84

P/R Deduction (\$86.36 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

677.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 221 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. ADAM S. BASS

Mailing Address 1205 WINCANTON DR

City
DEERFIELD

State Zip Code
IL 60015-3140

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.13

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR793415537825

Amount of Each Receipt this Period

222.28

P/R Deduction (\$55.57 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. GLEN R. GOLISH

Mailing Address 22261 HOLLYHOCK TRL

City
BOCA RATON

State Zip Code
FL 33433-4865

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR793450537825

Amount of Each Receipt this Period

375.33

P/R Deduction (\$48.98 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. IAN R. GEORGE

Mailing Address 600 CLEMSON DR

City
PITTSBURGH

State Zip Code
PA 15243-1736

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR793621437825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

697.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 247

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. KEVIN W. PAASCH

Mailing Address 3956 SHADY OAKS DR

City

VIRGINIA BCH

State

VA

Zip Code

23455-1628

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR794020437825

Amount of Each Receipt this Period

208.27

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. AMIE PALFFY

Mailing Address 20138 ENNIS DR

City

STRONGSVILLE

State

OH

Zip Code

44149-0992

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR794427837825

Amount of Each Receipt this Period

50.00

P/R Deduction (\$12.50 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. RYAN P. MCKEAN

Mailing Address 1080 NICHOLSON AVE

City

LAKEWOOD

State

OH

Zip Code

44107-1403

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR794428037825

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

358.27

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 223 OF 247
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARK J. DORMAN

Mailing Address 3980 FAIRWAY DR

City
MEDINAState
OHZip Code
44256-7847FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR794449337825

Amount of Each Receipt this Period

176.40

P/R Deduction (\$35.30 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHE A. PERME

Mailing Address 8197 GARFIELD DR

City
GARRETTSVILLEState
OHZip Code
44231-9122FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.29

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR794455137825

Amount of Each Receipt this Period

264.96

P/R Deduction (\$74.43 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JOHN F. OCWIEJA

Mailing Address 300 N CANAL ST STE 3

City
CHICAGOState
ILZip Code
60606-1312FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

999.98

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			3	1			2	0	1	4		

Transaction ID : PR794655537825

Amount of Each Receipt this Period

307.61

P/R Deduction (\$76.92 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

748.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 224 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. TIMOTHY W. POWERS

Mailing Address 1810 CHADSWORTH DR

City

SUN PRAIRIE

State

WI

Zip Code

53590-3554

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

GENERAL INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR794959137825

Amount of Each Receipt this Period

833.20

P/R Deduction (\$416.60 Monthly)

Full Name (Last, First, Middle Initial)

B. JASON L. PEEPLES

Mailing Address 3526 SHIRLWOOD AVE

City

MEMPHIS

State

TN

Zip Code

38122-4568

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR795097437825

Amount of Each Receipt this Period

150.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)

C. DAVID R. STEPHENS

Mailing Address 209 79TH ST UNIT B

City

VIRGINIA BCH

State

VA

Zip Code

23451-1973

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR795338737825

Amount of Each Receipt this Period

333.32

P/R Deduction (\$116.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1316.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 225 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. WALTER E. KATZ

Mailing Address 4414 BREAKWOOD DR

City
HOUSTON

State Zip Code
TX 77096-3505

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR795359637825

Amount of Each Receipt this Period

180.07

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CARLOS HERNANDEZ

Mailing Address 1211 WILDEWOOD CT

City
SUGAR LAND

State Zip Code
TX 77479-6294

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE BROKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.50

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR795364037825

Amount of Each Receipt this Period

288.80

P/R Deduction (\$144.40 Monthly)

Full Name (Last, First, Middle Initial)

C. EDWARD J. WIRTZ

Mailing Address 12 BRANDING IRON LN

City
ROLLING HILLS ESTATES

State Zip Code
CA 90274-2501

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.58

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR796003937825

Amount of Each Receipt this Period

210.85

P/R Deduction (\$41.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

679.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 226 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. EDGAR F. WHITMORE

Mailing Address 25535 CUMBERLAND LN

City

CALABASAS

State

CA

Zip Code

91302-3158

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF1000

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.08

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796010137825

Amount of Each Receipt this Period

166.68

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MAX A. ADAMS

Mailing Address 16232 NW 79TH AVE

City

MIAMI LAKES

State

FL

Zip Code

33016-6132

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.67

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796324637825

Amount of Each Receipt this Period

208.27

P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PATRICK MCCARRON

Mailing Address 35 SOVEREIGN DR

City

FLANDERS

State

NJ

Zip Code

07836-0230

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EXTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796416237825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

409.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 247

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. CHRISTOPHER SMITH

Mailing Address 48 HICKORY HILL DR

City
SOMERS

State Zip Code
CT 06071-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSMUTUAL TRUST COMPANY

Occupation
EXTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR796517237825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. WILLIAM F TOWILL

Mailing Address 44 ZENITH LN

City
GLASTONBURY

State Zip Code
CT 06033-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
CORNERSTONE RE ADVISERS LLC

Occupation
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR796591437825

Amount of Each Receipt this Period

34.62

P/R Deduction (\$11.54 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. ARKADY MILGRAM

Mailing Address 2858 WHITE RIDGE PL

City
THOUSAND OAKS

State Zip Code
CA 91362-5750

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2014

Transaction ID : PR796666637825

Amount of Each Receipt this Period

80.08

P/R Deduction (\$13.34 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

143.56

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 228 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KEVIN O FINNEGAN

Mailing Address 37 CHARTER RIDGE DR

City

SANDY HOOK

State

CT

Zip Code

06482-1573

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

SVP & DEPUTY GENERAL COUNS RS LAW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796668337825

Amount of Each Receipt this Period

28.86

P/R Deduction (\$9.62 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MS. ELAINE A SARSYNSKI

Mailing Address 75 BARNDORR HILLS RD

City

SUFFIELD

State

CT

Zip Code

06078-1360

FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EVP - RETIREMENT SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796671837825

Amount of Each Receipt this Period

288.48

P/R Deduction (\$96.16 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. DANIEL D. THOMASON

Mailing Address 405 COLEBROOK LN

City

DICKINSON

State

TX

Zip Code

77539-4043

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

154.20

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR796716037825

Amount of Each Receipt this Period

195.80

P/R Deduction (\$12.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

513.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 229 OF 247

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. DAVID R. NELSON

Mailing Address 4794 BORDAGES RD

City
BEAUMONTState
TXZip Code
77705-7675FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR796717237825

Amount of Each Receipt this Period

134.08

P/R Deduction (\$31.82 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL HIRSCHBERG

Mailing Address 122 PASADENA PL

City
HAWTHORNEState
NJZip Code
07506-2806FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

EXTERNAL WHOLESALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR811444937825

Amount of Each Receipt this Period

57.75

P/R Deduction (\$19.25 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MR. PAUL JANCO

Mailing Address 335 CEDAR LN

City
NEW HARTFORDState
CTZip Code
06057-2911FEC ID number of contributing
federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

AVP SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : PR811451337825

Amount of Each Receipt this Period

74.55

P/R Deduction (\$24.85 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

266.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 230 OF 247
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. MADISON P WHITNEY

Mailing Address 16 CARRIAGE LN

 City
 ESSEX

 State
 CT

 Zip Code
 06426-1316

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VP - RELATIONSHIP MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR811455137825

Amount of Each Receipt this Period

34.65

P/R Deduction (\$11.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. SCOTT W. ECKART

Mailing Address 4559 SUNFLOWER CT

City

ZIONSVILLE

State

IN

Zip Code

46077-8118

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

SELF

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR811820937825

Amount of Each Receipt this Period

122.70

P/R Deduction (\$29.55 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. MS. JEANNE G YOUNG

Mailing Address 10 PONDVIEW LN

City

SOUTHWICK

State

MA

Zip Code

01077-9264

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

MASSACHUSETTS MUTUAL LIFE INS.

Occupation

VICE PRESIDENT-CORPORATE ADMINISTR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
12				31				2014					

Transaction ID : PR904834637825

Amount of Each Receipt this Period

115.50

P/R Deduction (\$38.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

272.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 231 OF 247

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MS. CINDY BELMORE

Mailing Address 7 CRYSTAL DR

City
SOUTHWICK

State Zip Code
MA 01077-9613

FEC ID number of contributing
federal political committee.

C

Name of Employer
MASSACHUSETTS MUTUAL LIFE INS.

Occupation
VICE PRESIDENT - COMPLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.18

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR932682137825

Amount of Each Receipt this Period

80.79

P/R Deduction (\$26.93 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. CHRISTOPHE C. COCORES

Mailing Address 9 HUNT PL

City
MECHANICSBURG

State Zip Code
PA 17050-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.36

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR934761037825

Amount of Each Receipt this Period

83.40

P/R Deduction (\$20.85 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. JENNIFER C. ROSE

Mailing Address 10290 SHAWNS GROVE PL

City
MECHANICSVILLE

State Zip Code
VA 23116-5839

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.03

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2014

Transaction ID : PR934778737825

Amount of Each Receipt this Period

106.68

P/R Deduction (\$26.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

270.87

TOTAL This Period (last page this line number only)..... ►

98005.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 232 OF 247

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MassMutual Federal Credit Union

Mailing Address 1295 State Street

City

Springfield

State

MA

Zip Code

01111

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4261.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2014

Transaction ID : 63331232

Amount of Each Receipt this Period

2.33

Nov-14 Interest - Money Market Account

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2.33

2.33

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Massachusetts Mutual Life Insurance Company Political Action Committee

00:

Category/
Type

54.32

AMEX Processing Fees (Nov-14)

00

Category/
Type

Age Group	Number of People
13-17	129.25
18-24	100.00
25-34	80.00
35-44	60.00
45-54	40.00
55-64	20.00
65-74	10.00
75-84	5.00
85+	2.50

Chase PaymenTech Fees (Dec-14)

Category/
Type[illegible]

183.57

183.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 234 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. BADGERPAC

Mailing Address PO BOX 70980

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
2014 PAC Contribution

Candidate Name

BADGERPAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2014

Transaction ID : 62438417

Amount of Each Disbursement this Period

3500.00

2014 PAC Contribution

Full Name (Last, First, Middle Initial)

B. Victory Now PACMailing Address 10605 Concord Street
Suite 202

City	State	Zip Code
Kensington	MD	20895

Purpose of Disbursement
2014 PAC Contribution

Candidate Name

Victory Now PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2014

Transaction ID : 62438436

Amount of Each Disbursement this Period

3000.00

2014 PAC Contribution

Full Name (Last, First, Middle Initial)

C. Hoosiers For Rokita, Inc.

Mailing Address 5802 Oak Avenue

City	State	Zip Code
Indianapolis	IN	46219

Purpose of Disbursement
2014 Candidate Contribution

Candidate Name

Theodore Rokita

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2014

Transaction ID : 62716544

Amount of Each Disbursement this Period

2000.00

2014 Candidate Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

Massachusetts Mutual Life Insurance Company Political Action Committee

A. GOP Generation Y Fund

011

5000.00

GOP Generation Y Fund

Category/
Type

	House
	Senate
	President

☐ Primary ☐ General
☐ Other (specify) ▼

2014 PAC Contribution

State: District:

B. Liberty Project

M M / D D / Y Y Y Y
11 25 2014

011

4000.00

Liberty Project

Category/
Type

	House
	Senate
	President

☐ Primary ☐ General
☐ Other (specify) ▼

2014 PAC Contribution

State: District:

Full Name (Last, First, Middle Initial)

C. MASS PAC

011

2000.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

☐ Primary ☐ General
☐ Other (specify) ▼

2014 PAC Contribution

State: District:

11000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 236 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Treasure State PAC

Mailing Address 3242 Cummins Way

City	State	Zip Code
Missoula	MT	59802

Purpose of Disbursement
2014 PAC Contribution

011

Candidate Name

Treasure State PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : 62716590

Amount of Each Disbursement this Period

3000.00

2014 PAC Contribution

Full Name (Last, First, Middle Initial)

B. IMPACT

Mailing Address 509 Madison Avenue, Suite 1902

City	State	Zip Code
New York	NY	10022

Purpose of Disbursement
2014 Candidate Contribution

011

Candidate Name

IMPACTCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Transaction ID : 62716591

Amount of Each Disbursement this Period

2000.00

2014 Candidate Contribution

Full Name (Last, First, Middle Initial)

C. Priority PAC

Mailing Address P. O. BOX 3683

City	State	Zip Code
Little Rock	AR	72203

Purpose of Disbursement
2014 PAC Contribution

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Transaction ID : 62716592

Amount of Each Disbursement this Period

2500.00

2014 PAC Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 237 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alamo PACMailing Address 1919 Congress Avenue, Suite 14
Frost Bank Plaza

City Austin State TX Zip Code 78701

Purpose of Disbursement
2014 Candidate Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		25		2014

Transaction ID : 62746337

Amount of Each Disbursement this Period

3000.00

2014 Candidate Contribution

Full Name (Last, First, Middle Initial)

B. Kristi For Congress

Mailing Address PO Box 852

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
Event: Nov. 13, 2014

Candidate Name

Rep. Kristi Lynn NoemOffice Sought: ☒ House
☐ Senate
☐ President
State: SD District: 00Disbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2014

Transaction ID : 62811793

Amount of Each Disbursement this Period

2000.00

Event: Nov. 13, 2014

Full Name (Last, First, Middle Initial)

C. Kelly PACMailing Address 901 N. Washington Street
Suite 102

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
2014 PAC Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2014

Transaction ID : 63331093

Amount of Each Disbursement this Period

1000.00

2014 PAC Contribution

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 238 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Markey Committee; The

Mailing Address PO Box 120029

City	State	Zip Code
Boston	MA	02112

Purpose of Disbursement
2014 Candidate Contribution Funds Orig. Reported On Post-Election Report

Candidate Name

Sen. Edward MarkeyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : 63989149

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

2014 Candidate Contribution Funds Orig. Reported On Post-Election Report

Full Name (Last, First, Middle Initial)

B. Markey Committee; The

Mailing Address PO Box 120029

City	State	Zip Code
Boston	MA	02112

Purpose of Disbursement
2014 Candidate Contribution Re-designated funds for trans. dated 10/29/2014

Candidate Name

Sen. Edward MarkeyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2014

Transaction ID : 63989150

Amount of Each Disbursement this Period

2000.00

[MEMO ITEM]

2014 Candidate Contribution Re-designated funds for trans. dated 10/29/2014

Full Name (Last, First, Middle Initial)

C. Richard Burr Committee; The

Mailing Address Post Office Box 5928

City	State	Zip Code
Winston-Salem	NC	27113

Purpose of Disbursement
Candidate Support

Candidate Name

Sen. Richard M. BurrOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : 63999049

Amount of Each Disbursement this Period

1000.00

Candidate Support

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 239 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Next Century Fund

Mailing Address 116 South Royal Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Leadership PAC Contribution

Candidate Name

Next Century Fund

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:	Primary	General
	Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999050

Amount of Each Disbursement this Period

3000.00

Leadership PAC Contribution

Full Name (Last, First, Middle Initial)

B. Bob Corker For Senate 2018 Inc

Mailing Address 1015 Stonebridge Park Drive

City	State	Zip Code
Franklin	TN	37069

Purpose of Disbursement
Member Support

Candidate Name

Sen. Robert Corker

Office Sought:	House
	<input checked="" type="checkbox"/> Senate
	President

State: TN District:

Disbursement For: 2018	Primary	General
	<input checked="" type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : 63999051

Amount of Each Disbursement this Period

2500.00

Member Support

Full Name (Last, First, Middle Initial)

C. Grassley Committee Inc

Mailing Address PO Box 1000

City	State	Zip Code
Des Moines	IA	50304

Purpose of Disbursement

Candidate Name

Sen. Chuck E. Grassley

Office Sought:	House
	<input checked="" type="checkbox"/> Senate
	President

State: IA District:

Disbursement For: 2016	Primary	<input checked="" type="checkbox"/> General
	Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : 63999052

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 240 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Heller For Senate

Mailing Address PO Box 371907

City	State	Zip Code
Las Vegas	NV	89137

Purpose of Disbursement

011

Candidate Name

Sen. Dean Heller

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : 63999053

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. HellerHighwater PAC

Mailing Address P.O. Box 370672

City	State	Zip Code
Las Vegas	NV	89137

Purpose of Disbursement

011

Candidate Name

HellerHighwater PAC

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999054

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Georgians For Isakson

Mailing Address Post Office Box 250116

City	State	Zip Code
Atlanta	GA	30325

Purpose of Disbursement

011

Candidate Name

Sen. Johnny Isakson

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : 63999055

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 241 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. 21st Century Majority Fund

Mailing Address 6065 Roswell Road, #2274

City	State	Zip Code
Atlanta	GA	30328

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : 63999056

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Save America PAC

Mailing Address 264 North Lumpkin Street, #202

City	State	Zip Code
Athens	GA	30601

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999058

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Klobuchar For Minnesota 2018

Mailing Address PO Box 4146

City	State	Zip Code
St Paul	MN	55104

Purpose of Disbursement

011

Candidate Name

Sen. Amy KlobucharCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999059

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 242 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City	State	Zip Code
Melbourne	FL	32935

Purpose of Disbursement

011

Candidate Name

Sen. Bill Nelson

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999060

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City	State	Zip Code
Melbourne	FL	32935

Purpose of Disbursement

011

Candidate Name

Sen. Bill Nelson

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2013
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999062

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Whitehouse For Senate

Mailing Address P.O. Box 40280

City	State	Zip Code
Providence	RI	02940

Purpose of Disbursement

011

Candidate Name

Sen. Sheldon Whitehouse

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2018
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: RI District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

Transaction ID : 63999063

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 243 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Elizabeth For Ma Inc

Mailing Address PO Box 290568

City	State	Zip Code
Boston	MA	02129

Purpose of Disbursement

011

Candidate Name

Sen. Elizabeth A. WarrenCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2014

Transaction ID : 63999064

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Elizabeth For Ma Inc

Mailing Address PO Box 290568

City	State	Zip Code
Boston	MA	02129

Purpose of Disbursement

011

Candidate Name

Sen. Elizabeth A. WarrenCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2013

☐ Primary ☒ General
☐ Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2014

Transaction ID : 63999065

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. America's Leadership PACMailing Address 701 13th Street , NW
Suite 600

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement
PAC Contribution

011

Candidate Name

America's Leadership PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2014

Transaction ID : 64001780

Amount of Each Disbursement this Period

2500.00

PAC Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5500.00

63500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 245 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. CHARLES T. CIRAVOLO

Mailing Address 12 DARBY DR

City	State	Zip Code
HUNTINGTON STATION	NY	11746-4707

Purpose of Disbursement
Dec-14 Payroll Deduction Refund of Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2014

Transaction ID : 63899056

Amount of Each Disbursement this Period

45.80

Dec-14 Payroll Deduction Refund of Contribution

Full Name (Last, First, Middle Initial)

B. MR. MELVIN TI CORBETT

Mailing Address 11 MOUNTAIN SPRING RD

City	State	Zip Code
FARMINGTON	CT	06032-1612

Purpose of Disbursement
2014 p/d Refund

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		26		2014

Transaction ID : 64362456

Amount of Each Disbursement this Period

107.20

2014 p/d Refund

Full Name (Last, First, Middle Initial)

C. REVA Z. AZEEZ

Mailing Address 28511 PEWTER KNOLLS DR

City	State	Zip Code
KATY	TX	77494-0674

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2014

Transaction ID : 64365548

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

403.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 246 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. SCOTT T. GULLICKSON

Mailing Address 6423 GABRIELLE WAY

City
DAVENPORTState
IAZip Code
52807-3970

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : 64365549

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. DAVID R. KROLL

Mailing Address 5501 E GRANDVIEW RD

City
SCOTTSDALEState
AZZip Code
85254-1173

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : 64365550

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

C. IVAN VALDES

Mailing Address 2001 WAYHAVEN CT

City
MAITLANDState
FLZip Code
32751-4924

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2014

Transaction ID : 64365552

Amount of Each Disbursement this Period

416.65

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

546.65

1840.47

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 247 OF 247

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Massachusetts Mutual Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Chase PaymenTech

Mailing Address P.O. Box 29534

City	State	Zip Code
Phoenix	AZ	85038

Purpose of Disbursement
Chase PaymenTech Fees (Nov-14)

Candidate Name

001

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2014

Transaction ID : 64000951

Amount of Each Disbursement this Period

15.91

Chase PaymenTech Fees (Nov-14)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.91

15.91
